

SOCIAL SUPPORT, PSYCHOLOGICAL FACTORS AND SUBSTANCE USE AMONG EARLY ADOLESCENTS IN MALAYSIA

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**SOCIAL SUPPORT, PSYCHOLOGICAL FACTORS
AND SUBSTANCE USE AMONG EARLY
ADOLESCENTS IN MALAYSIA**

NOR HAFIFAH BINTI ABDULLAH

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RECOGNITION

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ABSTRACT

The main objective of this study was to examine the determinants predicting substance use among early adolescents in Malaysia. The predictors were social supports (received from family, peer and school) and psychological factors (resilience and depression). This study used secondary data from the National Anti-Drug Agency (NADA) obtained from 2177 secondary school students aged 13 to 14. Data were collected from six main zones in Malaysia, which were north (Pulau Pinang and Kedah), middle (Selangor and Kuala Lumpur), south (Johor), east (Kelantan), Sabah and Sarawak. The instruments used in this study were Adolescent Concern Evaluation, Resiliency Scale and Substance Use Questionnaire. The data was analysed using binomial logistic regression analysis with an alpha level of .05. Findings showed that the significant predictors to substance use activity were social support received from school ($\beta = -.82$, $Wald = .10$, $p = .00$), resilience ($\beta = -.60$, $Wald = .13$, $p = .00$) and social support received from family ($\beta = -.55$, $Wald = .13$, $p = .00$). Thus, the obtained results revealed that a high level of resilience, social support received from school and family reduces adolescents' chances of getting involved in substance use activity. Findings from this study highlighted the importance of resilience, social support received from family and school as the protective factors against the involvement in substance use activity. Thus, it can be used to assist school management in developing suitable prevention or intervention programs to enhance adolescents' resilience in solving their behavioural problems. Future studies may investigate the influence of other factors in predicting adolescents' involvement in substance use, such as neighbourhood disadvantage, low academic achievement, anxiety and low self-esteem.





SOKONGAN SOSIAL, FAKTOR PSIKOLOGI DAN PENGGUNAAN BAHAN DALAM KALANGAN AWAL REMAJA DI MALAYSIA

ABSTRAK

Objektif utama kajian ini adalah untuk mengenalpasti faktor kepada penggunaan bahan dalam kalangan awal remaja di Malaysia. Faktor kajian terdiri daripada sokongan sosial (diterima daripada keluarga, rakan sebaya dan sekolah) dan faktor psikologi (resilien dan kemurungan). Kajian ini menggunakan data sekunder daripada Agensi Anti-Dadah Kebangsaan (AADK) yang diperoleh daripada 2177 orang pelajar sekolah menengah berusia 13 hingga 14 tahun. Data kajian dikumpulkan dari enam zon utama di Malaysia iaitu utara (Pulau Pinang dan Kedah), tengah (Selangor dan Kuala Lumpur), selatan (Johor), timur (Kelantan), Sabah dan Sarawak. Instrumen yang digunakan dalam kajian ini ialah *Adolescent Concern Evaluation*, *Resiliency Scale* dan *Substance Use Questionnaire*. Data kajian dianalisis menggunakan regresi logistik binomial dengan tahap alpha .05. Hasil analisis menunjukkan faktor signifikan kepada aktiviti penggunaan bahan ialah sokongan sosial diterima daripada sekolah ($\beta = -.82$, $Wald = .10$, $p = .00$), resilien ($\beta = -.60$, $Wald = .13$, $p = .00$) dan sokongan sosial diterima daripada keluarga ($\beta = -.55$, $Wald = .13$, $p = .00$). Oleh itu, hasil kajian menunjukkan bahawa tahap resilien, sokongan sosial yang diterima daripada sekolah dan keluarga yang tinggi mengurangkan peluang remaja untuk terlibat dalam aktiviti penggunaan bahan. Dapatan dari kajian ini menekankan pentingnya resilien, sokongan sosial yang diterima daripada sekolah dan keluarga sebagai faktor perlindungan kepada penglibatan dalam aktiviti penggunaan bahan. Penemuan kajian ini dapat digunakan untuk membantu pihak pengurusan sekolah dalam merangka program pencegahan atau intervensi yang sesuai untuk meningkatkan tahap resilien dalam menyelesaikan masalah tingkah laku mereka. Kajian masa hadapan boleh menyiasat faktor peramal lain kepada penggunaan bahan dalam kalangan remaja seperti kelemahan kejiwaan, pencapaian akademik yang rendah, kegelisahan dan penghargaan sendiri yang rendah.





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LIST OF ABBREVIATIONS

ADHD	Attention Deficit Hyperactivity Disorder
CCR	Cumulative Contextual Risk
CRAFFT	Car, Relax, Alone, Forget, Friends, Trouble
FELDA	Federal Land Development Authority
GPL	General Public License
HIV	Human Immunodeficiency Virus
IBM	International Business Machines
IYRES	Youth Research Malaysia
LGB	Lesbian, gay and bisexual
MANOVA	Multivariate Analysis of Variance
NADA	from National Anti-Drug Agency
PROSPER	Promoting School-Community-University Partnerships to Enhance Resilience
RASCA	Resiliency Assessment Scale for Children and Adolescents
RM	Ringgit Malaysia
SEM	Structural Equation Modelling
SES	Socioeconomic Status
SHPS	School Health Promotion Study
SMFQ	Short Mood and Feelings Questionnaire
SPSS	Statistical Package for Social Sciences
STD	Sexually Transmitted Disease
THL	<i>Tiedosta terveyttä ja hyvinvointia</i> (National Institute for Health and Welfare)
WHO	World Health Organization





LIST OF SYMBOLS

Symbol

$\%$	Percentage
<i>C.I.</i>	Confidence Interval
<i>df</i>	Degrees of Freedom
<i>f</i>	Frequency
<i>M</i>	Mean
<i>N</i>	Population Size
<i>n</i>	Sample Size
<i>p</i>	Correlation Coefficient
<i>S.E.</i>	Standard Error
<i>SD</i>	Standard Deviation
<i>t</i>	Calculated Test Statistic
β	Standardized Beta
χ^2	Chi-Squared Value





APPENDIXS LIST

- A Questionnaire Booklet
- B Inter-item Correlation between Item of Each Variables
- C Application Letter to Use Research Data
- D Approval Letter to Use Research Data
- E SPSS Outputs for All Analysis





CHAPTER 1

INTRODUCTION



1.1 Introduction

Adolescents are precious generations that help to lead our nation in future. Many hopes are placed on them to become successful individuals and contribute to the well-being of the nation as a whole. However, nowadays, social illness among adolescents are getting worst day by day. In this chapter, issues related to substance use among early adolescence in Malaysia will be discussed. Besides, the background of the research, problem statement, objective of the research, research question, theoretical framework, significance of research, conceptual and operational definition in this research will be well explained in this chapter.





1.2 Background of Research

Adolescence is a milestone in human growth and development as a turbulent period of transition from childhood to adulthood, characterised by coexistent changes. It is a critical period of life in which a great deal of biological, psychological, and social changes occurs (Kurt & Ergene, 2017). According to the World Health Organization, adolescence comprises a period of development between 10 and 19 years (WHO, 2017). The population of adolescents in Malaysia is about 5.34 million; in other words, adolescents make up 16.35 percent of Malaysia's population (Department of Statistics Malaysia, 2020).

Nowadays, Malaysia has been overwhelmed with the issues involving adolescent and substance use activity (Chan, Sidhu, Lim, & Wee, 2016; Ismail, Ahmad, Ibrahim, & Nen, 2017; Shah, 2015; Singh, Müller, Mansor, & M., 2015; Singh, Müller, & Vicknasingam, 2014; Zainudin Sharif & Mohammad Roslan, 2011). Issues concerning substance use committed, especially by the adolescents in this country have been reported to be on the rise from time to time (Hilmie, 2018; National Anti-Drug Agency, 2017). Phenomena related to substance use among adolescent have been studied by many researchers emphasising on smoking, glue-sniffing, using fantasy substance and drink kratom (Boyas, Kim, Moon, Ruiz, & Gaines, 2017; Chongrattanakon, Thepthien, & Hong, 2018; Cox, Criss, Harrist, & Zapata-Roblyer, 2017; Ismail, Ismail, Nabil, & Nazar Mohd, 2016; Noor, Hassan, & Zain, 2018; Razali & Madon, 2016; Rovis, Bezinovic, & Basic, 2015)





The issues now are the factor that most likely influences Malaysia adolescents to get involved in substance use. Many possible factors could lead an adolescent to involve in this risky behavior. According to previous research, factors that involve are negative external environment (lack of support from family, peer and school) (Boyas, Kim, Moon, Ruiz, & Gaines, 2017; Gattamorta, Varela, McCabe, Mena, & Santisteban, 2016; Moore & McArthur, 2014; Santiago et al., 2017) and negative internal environment factor (resilience and Depression) (Barger, Vitale, Gaughan, & Feldman-Winter, 2017; Jackson, Seth, DiClemente, & Lin, 2015; Lipowski, Lipowska, Jochimek, & Krokosz, 2016; Torikka, 2017; Wilkinson, Halpern, & Herring, 2016). Throughout this study, the significant factors that are likely to affect Malaysian adolescents involved in substance use activity could be found.



In this study, secondary data analysis through logistic regression was conducted

to find the significant factor that leads adolescents to get involved in substance use activity. The researcher used the data set from the previous study conducted by Mohammad Nasir et al. (2013) known as "*Remaja Berisiko Mengambil Dadah: Langkah Pengesanan dan Pencegahan Awal*". Secondary data analysis is the analysis of data collected by someone else for another primary purpose (Johnston, 2014). Vartanian (2011) mentioned that this type of analysis is where secondary data can include any data examined to answer a research question other than the question(s) for which the data were initially collected. Besides, the use of existing data sets can accelerate the pace of research because some of the most time-consuming steps of a typical research project, such as measurement development and data collection are eliminated (Doolan & Froelicher, 2009).



Through the information and knowledge obtained from this study, all the necessary steps and precautions could also be taken into accounts. This study expected to explain more about issues related to adolescent's substance use in Malaysia and after all gives idea or suggestion such as preventions or development programs as the effort to tackle these behaviour problems in the future proactively and thoroughly. This effort is in line with the Institute for Youth Research Malaysia (IYRES) (under the Ministry of Youth and Sports Malaysia) to promote adolescents' development towards a better nation.

1.3 Problem Statement

The adolescent stage is a developmental stage that acquires maximise survival and reproductive fitness where risk-taking and subsequent drug experimentation during this developmental period increase the likelihood of developing a lifelong addiction, internalising and externalising behavior (Jordan & Andersen, 2017). Risk behaviors such as substance use, anti-social behaviors, suicide, are seen in adolescence compared to the other developmental stages (Pandian & Lakshmana, 2017; Skogen et al., 2014; Torikka, 2017). Children who begin using substances in adolescence are much more likely to become addicted than those who begin using after their teenage years (Palamar, Griffin-Thomas & Kamboukos, 2015).

In Malaysia, findings from the research conducted by Chan et al. (2016) indicated that the common substance use behaviors among secondary schools students are smoking, consuming alcohol, using marijuana and glue-sniffing. Bae, Kwon and Han (2018) mention many studies have been conducted to investigate the abuse statuses



of synthetic cannabinoids in Asian youth in Turkey, Japan, and Korea, and many cases of kratom abuse have been reported in Malaysia and Thailand. Cannabis, kratom and yaba have remained the three most commonly reported types of illicit drugs used in Thailand (Angkurawaranon et al., 2018). Singh et al. (2014) mention that kratom is controlled drugs in Malaysia, Thailand, and many European Union countries. Assistant Police Commissioner (ACP) Mohd Rozi Jidin, Chief Police Officer of Kota Setar, states that most adolescents involved in juvenile cases have committed crimes such as substance abuse, theft, fighting and blackmail, and that, according to him, the number of juvenile cases in Kota Setar district has increased from year to year (Berita Harian, 12 February 2017).

Razali and Madon (2016) in their study highlighted the issues and challenges of drug addiction among students in Malaysia and mentioned the role of parents, teachers, schools, and law enforcement authorities in ensuring the reduction of drug addiction (glue-sniffing, kratom, synthetic drug) are essential, as drug addicts needed support from their surroundings. According to the finding from a study conducted by Nachiappan (2015), through the interview with the clients from Association of Malaysian Addicts (PENGASIH), he found that the main factor leading to drug abuse is peer pressure, followed by environmental factor. Moreover, improving the adolescent's resilience level is one of the ways in preventing them from getting involved in substance use activity and reduce the negative effect of risk factor (Sanders, Munford, Thimasarn-anwar, Liebenberg, & Ungar, 2015; Siennick, Widdowson, Woessner, Feinberg, & Spoth, 2017). Besides, depression is a significant predictor of substance use among adolescent (Schuler, Vasilenko, & Lanza, 2015; Schwinn, Schinke, Hopkins, & Thom, 2016).





Based on the previous research finding stated above, this study is essential. It has been conducted to investigate and identify the significant factor that led to early adolescence in Malaysia to get involved in substance use. To the best of our knowledge, there is less study in Malaysia conducted to examine the social support, psychological factors and substance use among early adolescence in Malaysia in a single study. Therefore, this study intends to combine social support (received from family, peer and school) and psychological factors (resilience and depression) in a single study to find the significant factor that leads early adolescence in Malaysia to get involved in substance use activity.

This study has been conducted using secondary data from the previous study (Mohammad Nasir et al., 2013) and has been analysed through logistic regression as this will benefit because the previous study only conducted the descriptive analysis. From this study, a variety of proactive and comprehensive suggestions will be presented encompassing the strategy of enhancing social environment functions such as parents and families, peers, and schools to create high social support for adolescent development and improve their resilience and lessen their depression level.

1.4 Research Objective

This research aimed:

1. To measure the level of social support among early adolescents.
 - a. To measure the level of social support received from family among early adolescents.



- b. To measure the level of social support received from peers among early adolescents.
 - c. To measure the level of social support received from school among early adolescents.
2. To examine the level of psychological factors among early adolescents.
 - a. To measure the level of resilience among early adolescents.
 - b. To measure the level of depression among early adolescents.
 3. To determine the difference between male and female early adolescents in relation to social support.
 - a. To determine the difference between male and female early adolescents in relation to social support received from family.
 - b. To determine the difference between male and female early adolescents in relation to social support received from peers.
 - c. To determine the difference between male and female early adolescents in relation to social support received from school.
 4. To investigate the difference between male and female early adolescents in relation to psychological factors.
 - a. To determine the difference between male and female early adolescents in relation to resilience-
 - b. To determine the difference between male and female early adolescents in relation to depression.
 5. To determine the difference between gender and substance use among early adolescents.
 6. To identify what is the predictor to substance use among early adolescents (social support received from family, peers and school, resilience and depression).

1.5 Research Question

This research intended to answer these research question:

1. What is the level of social support among early adolescents?
 - a. What is the level of social support received from family among early adolescents?
 - b. What is the level of social support received from peers among early adolescents?
 - c. What is the level of social support received from school among early adolescents?
2. What is the level of psychological factors among early adolescents?
 - a. What is the level of resilience among early adolescents?
 - b. What is the level of depression among early adolescents?
3. Is there any significant difference between male and female early adolescents in relation to social support?
 - a. Is there any significant difference between male and female early adolescents in relation to social support received from family?
 - b. Is there any significant difference between male and female early adolescents in relation to social support received from peers?
 - c. Is there any significant difference between male and female early adolescents in relation to social support received from school?
4. Is there any significant difference between male and female early adolescents in relation to psychological factors?
 - a. Is there any significant difference between male and female early adolescents in relation to resilience?

- b. Is there any significant difference between male and female early adolescents in relation to depression?
5. Is there any significant difference between gender and substance use among early adolescents?
6. What is the predictor to substance use among early adolescents (social support received from family, peers and school, resilience and depression)?

1.6 Hypothesis

There were 11 null hypotheses proposed in this study:

H₀1: There is no significant difference between male and female early adolescents in relation to social support received from family.

H₀2: There is no significant difference between male and female early adolescents in relation to social support received from peers.

H₀3: There is no significant difference between male and female early adolescents in relation to social support received from school.

H₀4: There is no significant difference between male and female early adolescents in relation to resilience.

H₀5: There is no significant difference between male and female early adolescents in relation to depression.

H₀6: There is no significant difference between gender and substance use among early adolescents.

H₀7: Social support received from family is not the significant predictor of substance use among early adolescents.

H₀8: Social support received from peers is not the significant predictor of substance use among early adolescents.

H₀9: Social support received from school is not the significant predictor of substance use among early adolescents.

H₀10: Resilience is not the significant predictor of substance use among early adolescents.

H₀11: Depression is not the significant predictor of substance use among early adolescents.

1.7 Theoretical Framework

In this study, the theoretical framework consists of two factors that contribute to substance use among early adolescence in Malaysia which are social support (received from family, peer and school) and psychological factors (resilience and depression). Social support from family, peers and school, resilience and depression acted as independent variables while substance use is a dependent variable in this study. You may refer to Figure 1.1 for further detailed of theoretical framework in this study.

According to a past study conducted by Kurt and Ergene (2017), their study concluded that social support from family, peers, and teachers is an important protective factor against substance use compared to academic achievement and internalising behaviour (anxiety-depression, somatic complains and social introversion) factors. Their finding support by finding from a study conducted by Seil, Desai and Smith (2014) where they found adolescents who lacked connection with adult at school is more significantly related to substance use and having depressive symptomatology.

Besides, another psychological factor that has a significant effect on reducing the risk of adolescent involving in substance use is resilience, and it has been proved by the research conducted by Mota et al. (2016) where they found that resilience can mediate the quality relationship between teachers or institutional caregiver with adolescent and substance use. Oppose the finding of the study by Mota et al. (2016) is the study conducted by Hodder et al. (2017) as they found improving adolescent's resilience level didn't give any significant effect in reducing the prevalence of drug use.

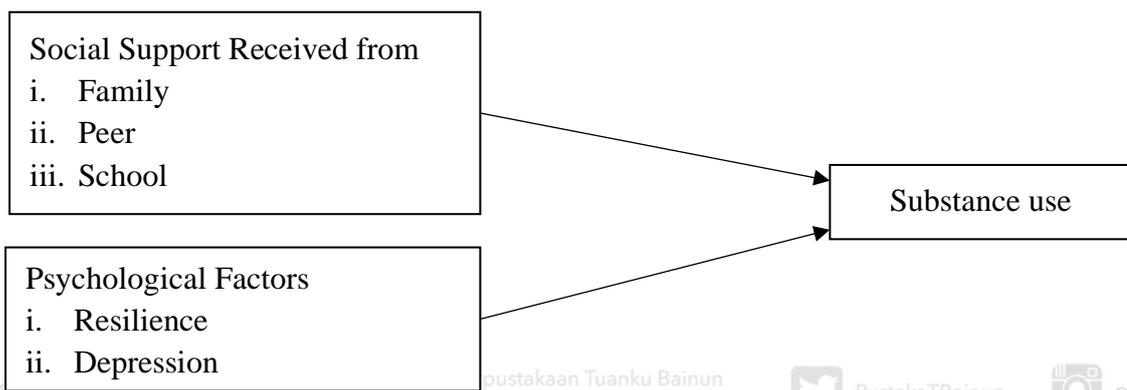


Figure 1.1. Theoretical framework of social support, psychological factor and substance use among early adolescence in Malaysia.

1.8 Significance of Research

It is necessary to create awareness about factors associated with substance use among adolescents, parents as well as in their teachers and peers with the help of school's counsellors. This present study throws light on the magnitude of the issues related to substance use among adolescent and its associated factors which can be further evaluated by qualitative and quantitative methods. Active, early intervention can help prevent worsening of problem-related to substance use among early adolescent and its impact on the life of the adolescents, family, school and community.



By increasing the level of social support (received from family, peer and school) and improving the psychological aspects (resilience and Depression), it is possible to prevent adolescent from getting involved in substance use. The findings of this study are expected to guide future research and prevention studies in the field of psychological counselling and adolescents' development. School counsellors and psychologists may undertake protective and preventive work to increase the social support that students received from family, schools and peers. Group guidance programs for peers and psychoeducational programs to develop relationships between counsellors, students, families, and teachers may be useful to overcome any issues related to early adolescent's substance use despite improving the resilience level and reducing the depression impact on the adolescent.



Moreover, this study is unique in examining specific types of social support and

psychological factors in a sample of adolescents selected due to their residence in difference area (urban, suburban and rural). By examining specific types of social support and psychological factors, I was able to determine the pattern of associations between social support and psychological factors with substance use among early adolescents. These findings are directly relevant to the development and implementation of prevention and intervention services.





1.9 Conceptual and Operational Definition of Variable

A conceptual definition outlines the basic principles underlying a term while an operational definition outlines a metric for measuring something of interest (Church, 2004).

1.9.1 Adolescents

According to the World Health Organization (28 November 2018) adolescence comprises a period of development between the ages of 10 and 19 years and this can be further subdivided into 3 groups that is early (10 to 14 years), middle (15 to 17 years) and late adolescence (18 to 19 years). Some psychologists consider that adolescence starts at age 12 to 18 years, which divided into three phases, such as early adolescence (age 12 to 14 years), middle adolescence (age 14 to 16 years), and late adolescence (age 16 to 18 years) (Persike & Seiffge-Krenke, 2012; Sontag & Graber, 2010).

In this study, the age of adolescent who involve was 13 and 14 years old which considered as early adolescence. The information related to the adolescents age obtained from the demographic background that attached with the set of the questionnaires.





1.9.2 Social Support Received from Family

Anderson, Funk, Elliott and Smith (2003) defined social support received from family is the children's' perception of how well the parents encourage the children in selection and engagement of activities. This is because help from the family is one of the ways on how parents can provide social support to their children (Das & Patnaik, 2007).

In this study, social support received from family measure using ten items from domain Social Support Received from Family in Malay version of Adolescent Concern Evaluation (ACE) (Mohammad Nasir, 2006). This domain consists of six positive items and four negative items. The high mean score indicates the adolescents received high



social support from family.

1.9.3 Social Support Received from Peer

Mead, Hilton and Curtis (2001) define social support received from peer occurs when people provide knowledge, experience, emotional, social or practical help to each other.

In this study, domain Social Support Receive from Peer in Malay version of Adolescent Concern Evaluation (ACE) (Mohammad Nasir, 2006) was used to measure social support received from peer and consist of three positive items and two negative items that make the total number of items is five. High social support received from peer indicates by the high total of mean score.





1.9.4 Social Support Received from School

The school is the learning environment generated by the interaction of human relationships, physical space and the psychological atmosphere (Perkins, 2006).

The domain of Social Support Receive from School in Malay version of Adolescent Concern Evaluation (ACE) (Mohammad Nasir, 2006) was used in this study to measure the social support received from school by the adolescents and high social support indicates by the high mean score on this domain. This domain consists of five items with one positive item and four negative items.



1.9.5 Resilience

Earvolino-Ramirez (2007) defines resilience with several characteristics for us to understand it better which include positive relationships or social support the individual has the individual's flexibility, aim or expectations in life, positive self-esteem or self-efficacy and sense of humour. Resilience is a developmental process as much as an individual characteristic (Ahern, Kiehl, Sole & Byers, 2006).

In this study, adolescents' perception about their resilience level was measured using the Malay version of the Resiliency Scale (Mohammad Nasir, 2006). This domain consists of 21 items and all items are positive item. The high mean score indicates the adolescent has a high level of resilience.





1.9.6 Depression

The fifth edition of Diagnostic and Statistical Manual of Mental Disorders has defined symptoms for depression; this includes depressed moods, psychomotor agitation or retardation, diminished interest or pleasure, insomnia, fatigue or loss of energy, diminished ability to concentrate, significant weight loss, feelings of worthlessness or excessive guilt, and recurrent thoughts of death (American Psychiatric Association, 2013). Individuals exhibiting five or more of those symptoms meet the criteria for major depressive disorders (Reynolds & Kamphaus, 2013).

Malay version of Adolescent Concern Evaluation (ACE) (Mohammad Nasir, 2006) was used in this study to measure adolescent's perception of depression level in the domain depression. This domain consists of nine items and all items are positive item. High level of depression indicates by high mean score.

1.9.7 Substance Use

Firstly, the researcher differentiates between substance use and substance abuse because the main interest of this study is, the researcher wants to measure substance use. Substance use referred to the use of drug, alcohol and included all substances such as cigarettes, illegal drugs, prescription drugs, inhalants and solvents (Health Link British Columbia, 2018). Substance use also refers to underage drinking, tobacco, or illicit and/or prescription and over-the-counter medications (Substance Abuse and Mental Health Services Administration, 2014). Next, according to World Health





Organization (2019), substance abuse defines as the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs that can lead to dependence syndrome (a cluster of behavioural, cognitive, and physiological phenomena that develop after repeated substance use).

In this current study, substance use was measured by using Substance Use Questionnaire (Mohammad Nasir et al., 2013) and the intention of this study is only wanted to measure if the adolescent involved or not involved in substance use activity. Four items of this questionnaire were used and subjects being asked about if they ever use any of the substances (smoking, glue-sniffing, using fantasy substances and drink kratom) in the past two weeks. All items are positive, respondents rate based on five discrete choices which are 1 (never), 2 (once), 3 (2 to 3 times), 4 (4 to 5 times) and 5 (6 times and more).

In this current study, the researcher considered if the adolescent answer 1 (never) means that they didn't involve in substance use activity, but if their answer is either 2 to 5, the researcher consider that they already involved in substance use activity. So, after considering these two outcomes, this dependent variable transformed from categorical to binary variable and data analysis used was logistic regression. Since the researcher want to analyse the data using logistic regression analysis, this dependent variable only has two possible outcomes: either involved or not involved. So, zero (0) represents that adolescents didn't involve in substance use activity, while one (1) represents adolescents involved in substance use activity.





1.10 Problem Behavior Theory

In this study, the theoretical approach that is used is the Problem Behavior Theory. Jessor and Jessor (1977) develop a psychosocial model which is Problem Behavior Theory (PBT) aims to explain about behavioral outcome such as substance abuse, risky sexual behaviors, and deviancy among adolescent and according to this theory, the emergence of risk behaviors is closely linked to adolescents' interaction with individual and their social environments. PBT consist of three independents but a related system of psychosocial components and adolescent risky behavior that are not explained with a single variable (Kurt & Ergene, 2017; Zamboanga, College, & Carlo, 2006). Adolescent risk behavior is explained based on these three-interaction systems, which are the perceived environment, personality and the behavior system.



Firstly, the perceived environment system refers to environmental characteristics such as social support, influence, controls, models and expectation of others that consists of both distal and proximal structure (Jessor, 1987). This system is named the perceived environment system because it sees how adolescents perceive the environment they lived with from their perspective (Karaman, 2013). The distal structure serves mainly to characterise whether the social context that the adolescent lived with is more to parent-family oriented or friend-peer oriented while proximal structure characterises social context in terms of prevalence models and supports or approval for problem behavior (Jessor, 1987). For example, lack of support from the parent, peer and school, lower parental disapproval and greater peer approval for behavioral problems lead adolescents to exhibit problem behavior.



Second, personality system consists of three components which are individual motivation, personal beliefs and personal control and these three components do not measure all aspect of personality, but represent the “the nature of the person” in a sociological sense (Jessor & Jessor, 1977). This involves one’s social thought, personal values, beliefs and attitudes (Kurt & Ergene, 2017). The motivational component consists of values and expectations about future and success, which means adolescents who have positive expectations about the future will behave in appropriate behavior and have negative expectations that often cause them to exhibit problem behavior (Karaman, 2013).

Personal beliefs component form by sub characteristics social criticism, alienation, low self-esteem and stress, which have an indirect effect on exhibiting problem behavior (Jessor, 1993). Lastly, the personal control component is a control mechanism when exhibiting problem behavior and when disruption tolerance is high. For instance, when adolescents exhibit problem behavior that is not approved or not exhibited frequently by society members, but they didn’t find that this behavior is wrong, this considered that the individual’s destructiveness tolerance is low (Karaman, 2013).

The last component is the behavior system that accounts for elicit societal apprehension and problem behaviors such as drug use and sexual activity (Alexander, Obong’o, Chavan, Vander Weg, & Ward, 2017). This system consists of three indices which are the problem behavior index, the healthy behavior index and the appropriate behavior index. To decrease problem behavior, exhibiting healthy and appropriate behavior are influential (Karaman, 2013).



Based on this theory, if there is existence of appropriate models or environment around the adolescents, such as parental, peer, and school, sufficient social support from family, peer, and school can help protect adolescents from involving in risky behavior. Several studies have demonstrated the evidence of PBT with various risk behavior such as substance use (Donovan & Molina, 2014; Jessor & Turbin, 2014; Kurt & Ergene, 2017; Sterrett et al., 2014; Whaley, Hayes-Smith, & Hayes-Smith, 2013; Yang, Cheng, Ho & Pooh, 2013), conduct problem (Jessor & Turbin, 2014; Mazur, Kowalewska, Zawadzka, Dzielska, & Wais, 2016; Melkman, 2015; Sterrett et al., 2014) and risky sexual behavior (Sterrett et al., 2014; Ndugwa et al., 2011).

The perceived environment, personality and behavior system also exist in this study. The perceived environment system comprised of social support (received from family, peer and school), the personality system consists of psychological factors (resilience and Depression), and the behavior system was defined by measuring substance use among these early adolescents in Malaysia. The social support (received from family, peer and school) in the perceived environment and psychological factors (resilience and depression) in personality systems has determinative effects on adolescents' behavior which either increase or decrease the probability of exhibiting substance use.





1.11 Conclusion

This chapter concluded several foundations such as the background of research and problem statement, including information about social support (receive from family, peer and school), psychological factor (resilience and depression), and substance use among early adolescents in Malaysia. This study will benefit adolescents, parents, school and community, and the objective and research question were clearly stated. Conceptual framework and six hypotheses have been proposed. Definition in terms of conceptual and operational with the theory that uses in this study also been discussed.

