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THE IMPACT OF CRYSTAL METHAMPHETAMINE UPON PARENTS: A PASTORAL CARE CHALLENGE

By

DENFORD MAKWETSE

STUDENT NUMBER: u21473057

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SUPERVISOR: PROFESSOR M. MASANGO

Declaration

I, Denford Makwetse, affirm that THE IMPACT OF CRYSTAL METHAMPHETAMINE UPON PARENTS: A PASTORAL CARE CHALLENGE

The dissertation submitted for the Degree of Master in Theology (in the field of Practical Theology) at the University of Pretoria is my own work. This dissertation is being submitted for the first time and it has not been submitted to any other University for examination. All sources that I have used within the text have been accredited by means of complete references.

Signature (Student) Date:

30 September 2024

Signature (Supervisor) Date:

Dedication

This dissertation is dedicated to my wife Prim, my daughters Fari-Chealsy and Ano-Chloe and especially my late three-year old daughter “Doc Tino-Claire” May your soul rest in eternal power. Your love, patience and encouragement made an extensive contribution to this undertaking. The work is also dedicated to all parents who are in different places in the world and precisely those who are situated in Beit-bridge battling with their child drug addiction. The dissertation is also devoted to all pastors who work days and nights, to ensure that parents who are survivors of their child drug addiction disorder are pastorally cared for.

Acknowledgements

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Abstract

The effects of the substance use problem extend beyond the children to include parents and other family members. This is especially true in a border town like Beit-bridge, Zimbabwe, where community members actively participate in the caregiving process by upholding the *Ubuntu* philosophy, and where parental bonds are stronger. This qualitative and narrative research examines the association between the parent and Crystal Methamphetamine child use problem. The use of Methamphetamine frequently results in increased sociological, psychological, physical and financial negative lived experiences. This changes the conversation regarding substance and drug use from being about a person, place, or event to one of suffering, outrage and a pastoral call for just participation. Even with the negative effects of Methamphetamine usage upon parents of addicts, parents nevertheless are expected to offer emotional support. As a model for caring and healing these negative lived experiences that parents are having, the research felt that by treating Wimberly and Gerkin interchangeably, it was shepherding. Wimberly used a narrative technique that demonstrated to us how parents' stories can be taken seriously and how they can get over their shame-based traits by relating Jesus' story which was employed in this study of overcoming shame. In their ministry of presence, clergy members serve as prophetic shepherds, and Gerkin's teachings encourage resilience through journeying with the affected parents.

Definition of Terms

Several key terms will be used in the study and these are applied in context of the research. Definitions of selected key terms are given below:

Crystal Methamphetamine: “Crystal Methamphetamine is a synthetic stimulant that activates the neurotransmitters dopamine, serotonin and noradrenaline in the brain” Drabsch (2006:3). These chemicals cause people to experience feelings of excitement, euphoria and alertness. Additionally, according to Murray (2019), it is a dangerously strong and highly concentrated type of methamphetamine.

Impact: Refers to the negative consequences that the usage of Crystal Methamphetamine has on parents who are living or have previously lived with a child with drug use disorder. These detrimental issues may include physical, emotional and financial.

Parents: are those above the age of 18 who have given either birth to or have raised a child, they play a part in child’s development by offering them emotional and psychological support among other needs. They have a role to nurture and mold their children to be responsible and contributing members of society.

Pastor: A pastor is a clergy member who oversees a Christian congregation, especially in certain non-episcopal congregations (Andrews, 2018).

Pastoral Care: According to Gerkin (1997) is a deliberate and cooperative process in which a skilled caregiver establishes a relationship with a person in need and aids them in recognizing and resolving their spiritual, emotional, and relational difficulties.

Family: Living together as unit, a family consists of one or more parents and their offspring (Benson, 2020). According to United Nations International Drug Control Programme (UNDCP) (1995:10), “The family is often viewed as the basic source of strength, providing nurturance and support for its individual members as well as ensuring stability and generational continuity for the community and culture”.

Key Words

Impact Crystal Methamphetamine Drugs Parents Pastoral Care

Acronym

CM	Crystal Methamphetamine (Crystal Meth)-This study's analysis of Crystal Methamphetamine is grounded in pastoral care theology.
UN	United Nations
UNODC	United Nations Office on Drugs and Crime
DDC	District Development Coordinator
CID	Criminal Investigation Department
MCZSAF	Methodist Church IN Zimbabwe South African Fellowship-Zimbabwean Methodist Church In Zimbabwe Immigrant community residing in South Africa
HIV	Human Immune Virus
AIDS	Acquired Immune Deficiency Syndrome
NIDAR	National Institute on Drugs Abuse Research

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CHAPTER 1

INTRODUCTION OF STUDY

1.0 Introduction

The following unpublished story, unfolds a real event experienced by the principal investigator while serving Disciples' Fellowship in South Africa (not real name), a mission station of the immigrant believers' community from Zimbabwe as a chaplain. Mr. and Mrs. Marimo (not real names) who resided in Gramme, Johannesburg lived happily until this morning when the sudden tragedy happened on the 25th of January 2020. It was just after Mrs. Marimo had woken up, around 03H30 for her morning prayer, only to realize that her elder son, Joe was in the kitchen pretending as if he was cooking. As she left him for sleeping in her bedroom, within a span of a minute, she was followed by a loud cry from Tim's bedroom. Joe had poured the overheated cooking oil on Tim; the younger brother and he was badly burnt. Mrs. Marimo woke up her husband who quickly jumped out of the bed to investigate what was happening. When Mr. Marimo was still asking Joe about the incident, Joe had picked a knife, he ripped his father's belly, and off he jumped through the window, 999 emergency team that was called by the first neighbors to arrive on the scene rescued Mr. Marimo. Mr. Marimo's bowels intestines were outside, and he was bleeding. Both Mr. Marimo and the son, Tim, were rushed to the hospital immediately.

Mrs. Jackson who is also a neighbour and also a fellow congregant with Mrs. Marimo in my parish called me and said "Pastor, one of your sheep, Mrs. Marimo is hysteric and traumatised after a terrible incident that happened in her house, please come urgently", On my arrival, Mr. Marimo and the son Tim were still in the house waiting for the police to come. Mrs. Marimo was sitting there watching the unbearable scene of her husband's intestines out and his son Tim's lifeless body, who had died from his burns. Later the police came, and cleared the scene, the boys' father was still alive and was taken to the hospital whilst Joe, who was seating in his bedroom was laughing, everyone could see that he was high on drugs, as he hardly knew what was happening. The police arrested Joe and his younger brother's body was taken to the mortuary. Few days after I was visiting Mrs. Marimo, I learnt that she was admitted in a Psychiatric hospital and the family

could not visit her as it was very far. Few members of the church came to me asking for help as they complained that they are struggling to let go in the minds of the scene that they witnessed at Mrs. Marimo's house. Mrs. Marimo was later discharged from the Psychiatric hospital and also his son was released from jail because the state said when he harmed his younger brother and the father he was not in his senses, was under the influence of crystal methamphetamine drug. When Mr. Marimo was discharged from the hospital, he refused to go back to his house to stay with Joe; finally, he went back to his home.

May the reader allow me to confess that, I knew Joe very well; he was one of the worship team members. However, after he was suspected of being high when he came to practices, the church leadership and I expelled him from the church. "I wonder now, if expelling him was the correct pastoral solution?"

My response to this case study remained an evocation of questions, which kept sinking into the soul of our humanness (Thesnaar, 2011:28). The gap that was opined between my ministry formative stages and the 8 years of practicing as an ordained minister could not help adequately in entering the space of the Marimo family especially their son Joe. This study identifies with Thesnaar who state "ministry is focussed on the church environment, progress and growth and forgets about the real ministry, which Christ called us to do" (2011:28). I felt guilty of procrastinating when it comes to dealing with these complex and challenging social ills. It is important for the reader to note that even institutions, where pastors attend classes, do not adequately prepare us for the real-world challenges that await us once we graduate. The intensity of this case therefore emphasizes the responsibility of practical theologians to deal with substance harmful use and critically di-grace its effects on the parents as caregivers in a responsible way.

1.1 Background of Study

The shared narrative above brought up concerns about how to support people in Beit-bridge District Municipality and Shule-Shule Township who are impacted by the dangerous usage of crystal methamphetamine. A Methodist Church in Zimbabwe clergyman is conducting this study, which focusses on the culturally diverse Beitbridge Township. The aforementioned narrative highlights his challenge of not being able to

accompany these parents on their journey, which compelled him to perform study to gather a methodology of support and journeying with them in pursuit of purpose and meaning.

Beitbridge the home of VhaVenda, a port of entry, is located in Zimbabwe sharing the border with Limpopo Province of South Africa. Until a tail link to Rutenga was established in 1974, the town, founded in 1929 served as a hub for trade of cattle and irrigated products like potatoes, melons, and tomatoes. Shule-shule is one of the local marketplaces under the Dulibadzimu High-Density location in Beit-bridge. It is characterized by facilities for general purchases and entertainment for both local communities and mobile population in Beit-bridge urban. The historical practice of naming places, which is still practiced in many areas of Zimbabwe, is what led to the acknowledgement of the location. Shule received the honor of being the first to construct a general grocery store in that neighborhood.

Business centers are called in honor of the first individual to open a store at a particular location. The main issue in the area is the high percentage of youth unemployment, which competes with the border town's fast-paced commercial activity and exposes many young people to quick money-making opportunities like drug deals. In an informal discussion about the effects of drugs on parents held at the researchers' local church, Detective Michael asserts that the spread of Methamphetamine in the region is connected to the hosting of the 2010 World Cup in neighboring South Africa. This did not exempt Zimbabwe and her porous border from becoming a conduit for drug use and trafficking. In a letter to the editor (2021:1), it is claimed, "Porous borders have seen drugs finding their way in (and recently out) of the country in huge volumes".

According to the instance of Beitbridge cited above, 114 cases were registered inside Beitbridge in the first four months of 2021. This highlights the challenges that, there are present in the area and set on which the study is focusing. This research determined that it is feasible to base the study on the premise that, substance use, is not about a person, about the place, about an incident, nor is it an event, but, rather, it is a condition of suffering, shame, outrage, and a call for just participate pastoral intervention. The initial claim on porous border post and statistical reviews indicates the devastating

consequences of meth, hence a border map illustrating a journey that start with curiosity and ends with destruction. By outlining this this pat with using a map, the research can gain a better understanding of the intricacies of addiction and strive towards intervention to deal with these border-line challenges.

Location of the Beit-bridge

Figure 1.1 Map showing Beitbridge border post bordering South Africa: Source- Encyclopedia Britannica (2020)

The study focusses on the negative effects of drug usage on parents in Beitbridge, a border town in Zimbabwe's Matebeleland South province. Additionally, the border post is what creates the political border between Zimbabwe and South Africa (Fitzmaurice, 2009). "The Beitbridge border is sub-Saharan Africa's busiest land port and it is the gateway to the sea for most of the SADC region" (Confederation of Zimbabwe Industries, 2015). The importance of the Beitbridge border post to this study is underlined by the fact that, "as a consequence of this strategic value, the government of Zimbabwe and South Africa have made strenuous efforts over years to expand surveillance (Crush et al., 2017 cited in Muzondo, 2020:13). The surveillance and security facilities have been installed to reduce leaks, smuggling or other offences (Irish, 2005 cited in Muzondo, 2020:13). Border authorities are responsible for checking people and goods, as well as the identification and monitoring of individuals and goods attempting to cross borders illegally (Duri and Marongwe, 2017, cited in Muzondo, 2020). However, porous border facilities have witnessed the influx of drugs between the two countries and this has gross effect on the parents of the targeted users.

1.2 Literature and Concept

1.2.1 Review

The influence of crystal methamphetamine on Beitbridge parents is the subject of the literature review. The researcher will look at three sources to review the literature. First, the researcher will look at what research from the West has to say regarding crystal methamphetamine's effects on current or former users' parents. Second, the study topic will be shaped by recognition of African scholarship, and third, an examination of Asian scholarship will be carried out. Within those three scenarios, the researcher will start to thoroughly comprehend the effects of Methamphetamine on parents of users.

One piece of Western Academia by Rossiter (2019) titled "Parents' Experiences of Crystal Methamphetamine Use: Implications for Family-Focused Interventions" examined the effects of Methamphetamine on parents of children who are currently using or have used the drug. The study is pertinent to the discussion of the effects of Methamphetamine on parents because it sheds light on the difficulties that parents confront in these circumstances and emphasizes the necessity for adequate pastoral care intervention.

Rossiter utilized a qualitative methodology to collect information from thirteen parents who were using services in New Zealand because of their children using Methamphetamine. The study examines the emotional, social, and economic repercussions that parents face and offers their distinctive viewpoints. The importance of comprehending the effects of Methamphetamine on parents and the resultant need for pastoral care interventions can be demonstrated by citing this research. A solid foundation for creating successful support techniques in pastoral care practices is laid by Rossiter's study, which offers insightful perspectives into the real-world struggles faced by parents dealing with the effects of their children's drug use.

The study "Psychosocial Impact of Methamphetamine Use among Parents of Adolescents in South Korea" by Kim and Kim (2020) is one recent Asian study that investigated Crystal Methamphetamine and its effects on parents with children who use or have used Methamphetamine. In this study, the psychosocial effects of Methamphetamine use on Korean parents of adolescent children were to be investigated. Ten parents who had children who were currently using methamphetamine or had previously used it participated in in-depth interviews with the researchers. The participants talked about their feelings, experiences, and difficulties they had to cope with as parents when dealing with their children's usage of Methamphetamine. This study is important when examining the effects of Methamphetamine on parents for several reasons. First, it sheds light on the difficulties and emotional pain experienced by parents of Methamphetamine-using or former users of their children. By gaining a better understanding of the support requirements and mental health problems of the parents, interventions and counselling techniques might be improved.

Second, the study emphasises how parents who are dealing with this issue need pastoral care and assistance. Pastoral care can play a vital role in helping parents during these trying times by offering them emotional support and counselling. Methamphetamine addiction can have serious effects on family dynamics and relationships. The study also contributes to the corpus of knowledge on Asian people's use of Methamphetamine. Making interventions and support services more suited to the individual needs of impacted parents requires an understanding of the distinctive cultural, social, and familial

aspects of Asian countries. Finally, Kim and Kim's (2020) study on the psychosocial effects of Methamphetamine use among parents of teenagers in South Korea offers important insights into the difficulties that parents of teenagers in that country confront.

A study by Reddy *et al.* (2019) titled "Prevalence and correlates of Crystal Methamphetamine use among university students in South Africa" is one recent African study that examined the drug. The study's objectives were to ascertain the prevalence of crystal methamphetamine use among university students in South Africa and to pinpoint risk factors that go along with it. The study used a cross-sectional survey approach and a self-administered questionnaire to gather information from 1,526 university students. The study's results showed that 9% of South African university students used Methamphetamine during their lifetimes. In addition, the study found several risk variables for Methamphetamine use, such as depressed symptoms, high levels of stress, and substance misuse among peers.

When utilized in conjunction with the research proposed question "The impact of crystal methamphetamine upon parents- A pastoral care challenge," the study may be pertinent. Pastoral carers can learn from the study's conclusions about the prevalence and dangers of crystal methamphetamine use among South African university students. With the use of this knowledge, pastors can create pastoral care plans and interventions that are suitable for families whose children are now using Methamphetamine or have in the past. This study also emphasizes the need for additional research to look at the effects of Methamphetamine usage across other population groups, such as parents and their children. Such studies may shed light on the difficulties parents encounter when attempting to support their children who are battling Methamphetamine addiction. Overall, this body of knowledge from the West, Asian and African schools of thought demonstrate the relevance and necessity of studying Methamphetamine use to address the problems associated with drug addiction in African communities.

Reflecting on the three corpora of knowledge as exposed, the researcher notes that the Reddy *et al.* study is more focused on the students within the university setting when explaining the impact of Methamphetamine. Whilst Rossiter addresses the impact of Methamphetamine upon parents from a Western perspective, Kim and Kim who reflect

on the phenomenon from an Asian perspective and mention that parents in Korea are facing tremendous difficulty because of their children's use of crystal meth further elaborate this thought. Of the three sources, the closest one that articulates my experience is Kim and Kim (2020). The researcher's context when investigating the lived experiences of affected parents values a communal approach in addressing the problem, which is also prevalent in African settings, which sets on *"Ubuntu".* The bias to this Asian choice of scholarship is compared to the Western individualistic approach towards proposing practical, immediate interventions and support services more suited to the individual needs of the impacted parents.

1.2.2 Theoretical Framework

Wimberly's storytelling technique can be applied to assist parents in sharing their tales and expressing their feelings in a secure setting. Retrospect of the methamphetamine, storytelling can assist impacted parents in processing their feelings, gaining insights into their problems and connecting with others who are experiencing comparable circumstances. In this situation, caregivers can provide pastoral care and counselling to parents who are struggling with the effects of methamphetamine use. They will help them to cope with their emotions and providing them with a supportive presence in line with Gerkin's shepherding theory. The theory emphasizes the role of the pastor as a caregiver who offers guidance and support to those in need (Gerkin, 1997). Gerkin's traditional shepherding theory for pastoral care will substantiate Wimberly narrative model through introspection of the quad-logical concepts. For example, leadership structures of how priests, prophets, wise men, and wise women collectively took authority of shepherding individuals and families and communities giving attention to the issues and concerns of the contemporary culture (Gerkin 1997:36) as shown in the quadrilateral structure.

The Quadrilateral Structure

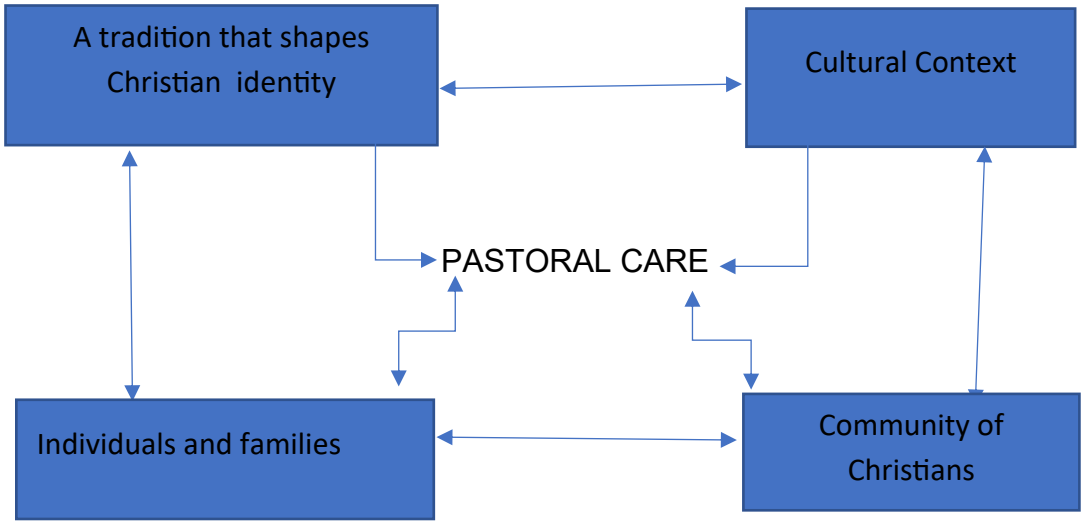

Figure 1.2 The Interpretive Structure of Pastoral Care: A Quadrilateral Schema. Source-Gerkin (1997:35).

1.3 Healing and Caring

For the objectives of this discourse, Gerkin's shepherding and Wimberly's ethnographic approaches have been opted for the following reasons:

1.3.1 Shepherding Model-Gerkin, V. Charles

According to Gerkin's shepherding philosophy, the pastor serves as a caregiver who provides advice and support to individuals who are in need. In this situation, the pastor can offer pastoral care and counselling to parents who are dealing with the aftereffects of Methamphetamine use, assisting them in coping with their emotions and providing them with a reassuring presence.

1.3.2 Storytelling Approach- Wimberly, P. Edward

Wimberly's storytelling technique can be applied to assist parents in sharing their experiences and stories in a protected and encouraging setting. By speaking stories, parents can process their feelings, understand their challenges, and connect with others who are experiencing comparable circumstances.

Overall, by combining these two approaches into their pastoral care work with parents affected by Methamphetamine use, caregivers can offer a more comprehensive and effective type of support that addresses both the emotional and practical difficulties of the circumstances. In this study, the researcher makes a strong case for the Gerkin shepherding model, particularly when it is applied critically from an African perspective and helps traumatized African parents heal. The shepherding model allows for the telling of stories and the creation of environments that promote resilience to connect and journey with the affected families effectively.

1.4 Methodology

1.4.1 Introduction

Interpretive Phenomenological Design (IPD) will be employed in this study. According to Creswell (2013), a qualitative methodology is an approach that focuses on understanding people's experiences and how they make meaning of them. In order to apply IPD to the subject of how Methamphetamine use affects parents, the researcher would want to speak with parents in-depth about their experiences raising children who struggle with substance use disorders and then offer a model that takes into account their real-world experiences.

1.4.2 Research Philosophy

This section will explore the methodology of pastorally caring for parents who are affected by the drug methamphetamine, because of their children. The ideal research philosophy will be interpretivism. Interpretivism is a research philosophy that emphasizes the significance of understanding and interpreting human behaviour within its social and cultural contexts. According to the philosophy, knowledge can only be comprehended through interpreting human experience in one's unique way. According to interpretivists, the significance of the experiences and actions of research participants is based on their unique social, cultural, and historical context. Therefore, rather than generalising their findings, interpretive researchers place a strong emphasis on developing a deep, qualitative grasp of the subjective experiences and meanings of the individuals they are studying within the context. Denzin and Lincoln state that interpretive inquiry is an umbrella term covering a variety of epistemological and ontological positions, all of which

assume that knowledge of reality, including its meanings and intentions, is the product of interpretive activity" (2011:14). Various techniques, including participant observation, focus groups, interviews, and document analysis, may be used in interpretive research and for the purposes of this research, in-depth interviews and document analysis will be employed.

Martin Heidegger, A German philosopher, is one of the key figures," connected to interpretive research. Heidegger proposed that people must interpret the world around them in order to understand it and that this interpretation occurs through pre-existing cultural, social, and historical contexts. Another important theorist in interpretive research is American sociologist Max Weber, who promoted "verstehen," which is the term for the empathetic understanding of people's subjective experiences and actions. The researcher proposes to adopt an interpretive approach to enable concentration on examining subjective experiences and meanings. Qualitative techniques, in-depth interviews and document analysis will be utilised to fully comprehend unique views within the impacted parents' environment where children are currently using or have previously used methamphetamine. This philosophical approach contributed by Heidegger and Weber, will greatly benefit this study in interpreting detailed and subjective experiences of the parents who are living and/or have previously lived with children using methamphetamine.

1.4.3 Research Approach

Saunders, Lewis, & Thornhill submit that researchers can follow a deductive or inductive approach to research (2007:117). In the former, the researcher forms a hypothesis to test a theory, while in the latter, which has been opted for this study, the researcher first collects the data and then, from the data analysis, develops a theory.

1.4.4 Research Method

The proposed research will employ qualitative methodology in its approach. Creswell (2013) defines qualitative research methodology as an inquiry approach that aims to understand complex human phenomena through the interpretation of social and cultural aspects. This method aims to identify and interpret people's opinions, experiences, convictions, attitudes, and behaviours. According to Denzin & Lincoln (2017), its primary

objective is to provide a thorough understanding of human behaviour, which may be influenced by a variety of theoretical stances. The qualitative research approach is significant in this study because it allows the researcher to gain more insights into the impacts of methamphetamine on parents of users. Silverman (2016) substantiates the notion by stating that in-depth descriptions of parent's ideas, feelings, and attitudes that may not be readily apparent are provided by qualitative research, which is the greatest method for examining human experience.

Qualitative In-depth interviews with parents whose children are battling Methamphetamine use as well as with experts who have expertise in helping parents in these circumstances will be conducted as one research strategy for this subject. Wimberly's narrative concept will allow the researcher during the interviews to enter into the social and cultural setting in which these parents are located. As well, storytelling helps to unpack experiences and interpretations affecting the parents. In general, the study strategy would be based on the notion that people construct their knowledge and reality, and that comprehending how people do so is crucial to understanding the effects of Methamphetamine use upon parents in a pastoral care context. This would provide a more nuanced understanding of the difficulties parents confront in the context of Crystal use disorders, and how they might be supported by pastoral care. However, as a result, the primary focus of the study is on shepherding, and it is at this point that Gerkin steps in with a prophetic vocation to speak for the silent parents who are battling with the impact of their children's drug use disorders.

1.4.4 Research Strategy

There are a few main research procedures that are frequently employed in phenomenological research because they frequently entail a thorough examination of individual experiences, according to Creswell (2013). A case study research strategy will be employed in this study for it supports theory building considering that existing theoretical and conceptual frameworks are inadequate (Ponelis, 2015:536; Yin, 2009). Interviewing people who have personally experienced the phenomenon in question and asking them open-ended questions about their perspectives is one way to gain an intensive and holistic description and analysis of real-life situations [see appendix A for

questions to be asked]. Exploring shared experiences or perceptions among a group of people, focus groups or group interviews are another technique. Additionally, researchers may participate in participant observations, in which they immerse themselves in the event and make thorough notes on their observations. Finally, scholars may also examine records like letters, diaries, or other written papers. This phenomenological study will use interviews and records analysis to examine the experiences of the affected parents and analyze recommendations and outstanding themes from the previously researched experiences of the parents currently living with children using Methamphetamine or in the past. These two will contribute to a more thorough understanding of Methamphetamine usage's impact on parents.

The researcher can gain insight into the parents' internalized shame, stigmatization, and pain through interviews. Examining research articles' insight into the patterns underlying those, experiences can help the researcher figure out how to restore the intrinsic worth of the affected parents. By utilizing various techniques, the researcher may also support the validation and triangulation of your findings, ensuring that your findings are more solid and reliable. Understanding people's lived experiences in particular contexts is the goal of the qualitative research method known as phenomenological research. To cater for all various educational levels, some of the interviews will be conducted in vernacular (Shona) and transcribed in English with accuracy.

1.4.5 Sampling Method

Purposive and snowball sampling techniques will both be used by the researcher to recruit participants in this study, to get a variety of opinions and experiences about the effects of Methamphetamine upon parents and pastoral interventions which are already in place by pastors. These can be immensely useful for recognizing recurring themes and difficulties faced by parents in this circumstance and for creating potent pastoral techniques to support them as they navigate their experiences. All parents above 18 years of age, gender inclusive, and regardless of affiliation will participate in the interviews. Selecting individual parents and pastors who meet a set of requirements that are pertinent to the research topic would be the goal of using purposive sampling, (Yin, 2014). Utilizing this non-probability method, this study would want to choose parents who have been affected by their children's use of Methamphetamine. According to Patton

(2015), age, gender, and geography may be considered when selecting volunteers. On the other hand, snowball sampling is selecting one or more participants who meet the researcher's criteria and asking them to recommend additional people they know who meet the same criteria, says Creswell (2014). With the help of this technique, the researcher can connect with a wider range of possible participants who might not be simple to contact using the purposive technique. In light of this, the researcher proposes to interview affected parents and religious figures with expertise in assisting families and individuals impacted by drug use. From these participants, the researcher will gather as much data to gain a deeper grasp of the difficulties confronting these parents.

1. Four affected parents have and/or are currently experiencing at least the impact of Crystal Meth use as parents [See appendix for questions].

2. Three pastors have offered pastoral intervention to affected parents [See appendix for questions to be asked].

This sample size's objective is to collect as many data and insights as possible. Samples will be contacted and, the researcher will ask for permission to utilize the data acquired for this study. The data will be used to inform the purposes of this research, through deduced major themes affecting parents with children battling Methamphetamine addiction. This experience will enable the researcher to propose effective practical pastoral care interventions suitable for these affected parents.

1.4.6 Data Analysis

Research on subjects like "The impact of Crystal Methamphetamine uses upon parents-A pastoral challenge" can benefit greatly from thematic and coding data analysis tools (Saunders et al, 2012). Finding themes and patterns within data is the first step in thematic analysis. For example, a possible topic in this situation may be: what emotional effects does Methamphetamine use have on parents? Following the discovery of these themes, the researcher will begin to code the data to isolate particular cases that fall within each theme. For instance, if the participant responded to a question with anger, the researcher will label that the response as having an "emotional impact."

1.4.7 Data Presentation

Statistical measures of central tendency and dispersion, frequencies, tables, pie charts, and graphs where appropriate will be employed in presenting results. These tools have been chosen as they allow easy observation and comparison of variables for example, records transactions system. Data will be organized and entered on a question basis then analyzed on a quantitative nature and graphical presentation will become very useful. Qualitative data will be analyzed using narration.

1.4.8 Research Trustworthiness

The data collection methods and instruments to be used are the best as they are consistent provide a free environment for data extraction and the data on the questionnaire will be relevant to the research questions. The data collection instruments will be pilot-tested for valid reliable findings.

1.4.9 Ethical Considerations

The researcher will take into consideration all ethical practices shared by the University of Pretoria and maintain them throughout the study. The research will reference all information obtained from secondary sources and the authors shall be acknowledged (Welman *et al*, 2005:182). Confidentiality, the researcher will apply crucial elements to safeguard the privacy of any parents who are dealing with drug usage problems. This means that any information concerning their drug use condition should only be disclosed when it is necessary and only with their express consent opines Creswell (2009:94). The subject will be approached without passing judgement; it's essential to do so because this will help interviewees to share freely the information needed. A non-judgmental attitude can help the researcher foster a safe and supportive environment for parents impacted by children's Methamphetamine use disorder because these parents probably already suffer from feelings of guilt and shame. Informed consent-the basis for any proposed intervention or therapies for parents should be informed consent, this means that every suggested treatment should fully disclose to parents any potential dangers, advantages, and alternatives and those parents should be given the chance to ask questions and make educated decisions. Each participant will reserve the right to withdraw from the study at any point before the completion of the research (Welman *et al,* 2005).

Cultural awareness of the parents' cultural origins, substance misuse and addiction might have various cultural connotations and implications. Therefore, the research will be cognizant of cultural variances and refrain from assuming. In his discussion of federal regulations that protect against human rights violations, Creswell quotes Sieber's work from 1998, which states, "For the researcher, the institute review board process requires assessing the potential risks, such as physical, psychological, social, economic, or legal harm needs of a vulnerable population"(2009:94). In light of the argument, the study will make sure that the University of Pretoria grants permission. The area of philosophy known as epistemology is focused on the investigation of knowledge and the process through which we acquire it. The presumptions, convictions, and ideals that guide the study process and strategy are referred to as epistemology in this context. The research topic "The Impact of Crystal Methamphetamine upon Parent: A Pastoral Care Challenge" source calls for an epistemological stance that acknowledges the complexity of the subject and the significance of multiple perspectives.

Critical theory is one potential epistemic position for this research issue. This epistemology places a strong emphasis on how social structures and power relationships affect how people learn and experience things. A critical theory approach would be most appropriate in this study because it acknowledges that broader social and economic variables, such as poverty, trauma, and discrimination, which are common in most African spaces, have an impact on parent's perceptions of their children's use of methamphetamine in the context of this research.

1.5 Problem Statement

The story on Drug abuse tormenting Beitbridge parent's exposited at the beginning raises several questions that will assist the researcher in addressing the problem faced by affected parents. Methamphetamine use has raised more and more concerns in society, not just, because of what it does to the user's health and well-being, but also because of what it does to their loved ones, especially parents. The purpose of this study is to examine how Methamphetamine use affects parents, including the practical, emotional, and spiritual difficulties they encounter in dealing with their child with Methamphetamine use disorder (Moreland & McRae-Clark, 2018). The study will be compelled to investigate

how faith and spiritual direction benefit parents and provide hope for recovery using a pastoral lens.

1.5.1 Research questions

1. What are the lived experiences of parents impacted by children with Methamphetamine use disorder now or in the past?
2. How does raising a child using Meth disorder, affect parents' emotional and psychological health?
3. What pastoral methods do pastors use during this time of need?
4. What are the most effective pastoral care interventions that pastoral care practitioners should use to help affected parents who are now raising or have raised a child with a Methamphetamine use disorder?
5. What effective pastoral care interventions can pastors, community leaders, and policymakers use to support parents affected by Methamphetamine use disorders?

1.6. Aim and Objectives

1.6.1 Aim

The study aims to investigate and comprehend the negative experiences faced by parents whose children are currently using or have previously used Methamphetamine. The study also seeks to identify practical pastoral care interventions that can be used to help stimulate resiliency and recovery for these parents.

1.6.2 Objectives

1. To investigate the experiences of parents who have been affected by their children's use of Methamphetamine disorder currently or in the past.

2. To comprehend the effects of raising a child who is using crystal methane disorder and its impact upon the parent's emotional and psychological state.

3. To determine the elements that help parents cope with the difficulties presented by Methamphetamine to handle their situations.

4. To recommend the most effective pastoral care interventions that caregivers and professionals can use in order to assist parents affected by raising or previously have raised a child with Methamphetamine use disorder.

5. To offer suggestions for pastors, community leaders, and policymakers on how to support parents affected by Methamphetamine addiction through efficient pastoral care interventions.

1.7 Relevance of the study

Given the widespread use of Methamphetamine and its negative effects on people, families, and communities, the study "The Impact of Crystal Methamphetamine upon Parent: A Pastoral Care Challenge" has a lot of relevance in practical theology. Practical theology deals with human problems faced in daily occupation, it therefore falls within the area of pastoral care. The study offers significant pastoral perspectives on the difficulties encountered by parents whose children use or have previously used Methamphetamine and the effects this has on their lives. Participants will be exposed to practical coping mechanisms, which help them restore their intrinsic value within themselves and in the community. Building a self-resilience procedure will be the goal of the research, to enable participants to keep focused despite the problem. The research will add to the body of current knowledge on journeying with affected parents whose children are battling Methamphetamine addiction and will help policymakers and the community to respond towards the fight against the stigma and shame of these affected parents.

1.8 Motivation

The principal investigator was often troubled by the lived emotions, experiences, and struggles shared by parents who are battling the use of Methamphetamine by their children. There are many reasons why the study must look at how Methamphetamine affects parents, one of which is to shed light on the challenges and emotional suffering those parents of children who use Methamphetamine today or in the past have to deal with. The principal investigator was found guilty of failing to better grasp the situation facing these parents in his capacity as a pastoral care provider, as a result, no assistance or intervention service has since been provided to address the issue. This gap led the researcher to grapple with his conscience and challenge his reason for existence in a

community without intervening in the ills of the same community due to threatening socio-economic challenges, hence the motivation to embark on the study.

1.9 Research Gap

The planned study discovered that more research relating to the context of the study has been done in areas such as Health/Medical, Humanities, and Philosophy. Practical Theology, however, has not seen much progress and a further exploration of experiences of parents beyond the clinic, social, and psychology settings call for a visit. The researchers conducted the following studies:

In Theology, “Harmful use of Nyaope among youth in Etwatwa”: A South African Pastoral Challenge (Zabeko, 2020). The idea of pastoral care to prevent youth from using Nyaope negatively was a major focus of Zabeko’s (2020) research. Nyaope is one of the most difficult issues facing black communities in South Africa, and it has encouraged numerous anti-social behaviours in young people. Zabeko’s focus on mentoring young people has been criticized as leaving a void in this research's consideration of pastoral care that addresses the consequences of Methamphetamine on parents whose children the principal investigator has discussed. However, Wimberly’s narrative and Gerkin’s shepherding models are still applicable to this study, but with a focus on journeying with the parents who are affected. "The impact of Methamphetamine use on parenting," was the subject of social studies research by Hoffman and Su (2014). The article suggests a research gap to investigate the impacts of Methamphetamine on parents rather than on parenting, yet some conclusions will be derived to analyze the topics. Since this study is grounded in the subject of practical theology, it suggests potential approaches for interacting with parents who are affected by their children's use of Methamphetamine. It also tries to convince community caregivers to take an active role in the caring process without passing judgment.

The philosophical study conducted by Madzvamutse (2021), who concentrated on family experiences and the family's influence on the development of substance use in adolescents and young people in Zimbabwe, revealed this discrepancy. The stress that mothers face and how this stress affect their subjective well-being were the focus of health

research by Groenewald and Bhana (2015); however, while appreciating this work, the researcher intends to dialogue with the themes in the findings and investigate the themes when relating with fathers as well on a pastoral perspective. As seen in several of the linked studies, it may be a challenging and painful experience for any parent to watch their child suffer from a substance use disorder and support the user. However, despite being the primary caregivers in this study, parents are equally affected. More studies are needed to debunk societal myths like "men do not cry," and help break the silence of these fathers so that the pastoral care professionals can address their experiences with substance users they are sharing or previously shared life with.

There is a relatively dearth of research on the need for pastoral care programs designed exclusively for parents struggling with their children's addiction to Methamphetamine, according to the principal investigator's analysis of the corpus of knowledge he was able to access. Hence, there is a need to fill the knowledge gap of research on pastoral care treatments successful in addressing the socially and economically disadvantaged African setting. In addition, there is a need to address the scantiness of research on pastoral care interventions effective in addressing the socially and economically impacted African environment. A practical theology study on the subject of "The Impact of Crystal Methamphetamine upon Parents-Pastoral care challenge" is pertinent. The research is necessary to relate to the world of unpleasant experiences that parents of children who use or have used Methamphetamine go through and develop a model for caregivers to relate to these parents effectively.

1.10 Epistemology

Creswell (2014) posits that the area of philosophy known as epistemology is focused on the investigation of knowledge and the justification of beliefs. A pastoral care dilemma that necessitates knowledge of the epistemology of addiction and its consequences on persons and families is the issue of how Methamphetamine affects parents of children who are currently or have previously used the drug. Numerous academic fields, including anthropology, psychology, sociology, and neuroscience are involved in the complicated study of addiction. The epistemology of addiction seeks to comprehend the fundamental processes that give rise to addiction, the elements that contribute to its growth, and the

effects of addiction on both individuals and society. The research topic "The Impact of Crystal Methamphetamine upon Parents: A pastoral care challenge" emphasizes the importance of epistemology for several reasons.

Epistemology assists in identifying the types and sources of knowledge regarding the effects of crystal meth on parents and their children that are already documented in the literature. Creswell (ibid) notes that the researcher is enabled to recognize and scrutinize the underlying presumptions and values that influence the discourse on this subject. This can assist in identifying any biases or constraints in recent research that need to be addressed. Additionally, the methodology and strategy used in the study might be influenced by epistemology to guarantee that the findings are accurate, legitimate, and significant. Lastly, it can aid in the creation of pastoral care initiatives that are based on solid theoretical and empirical comprehension of the effects of Methamphetamine on parents. To summarize, to understand the consequences of Methamphetamine on parents of current or former users, it is imperative to understand the epistemology of addiction. In addition, it can be challenging to provide pastoral care for these parents.

1.11 Synopsis of the Project

This study has seven (7) chapters aimed at addressing the subject matter. The coherent structure of the study is as follows:

Chapter One: Introduction. This chapter provides a background presentation and sample area of the study. Covers among other things, the outline and introduction, aims and objectives, problem statement, methodology, the relevance of the study and the research gap among other topics. It introduces the underlying foundation of the study as well as the research problem. In the same vein, a clear aim and objectives of the study and research methodology to be employed has been outlined.

Chapter Two: Literature Review. This chapter critically covers an overview of the literature review based on results and empirical studies on the issue of Methamphetamine. Appropriate brief definition of Methamphetamine and coping concepts on Methamphetamine is reviewed in detail.

Chapter Three: Methodology. This chapter presents the *modus operandi* of the study, steps and applied research methods used in data collection. A case study design will be used, and secondary and primary data will be collected to assess the effects of substance use disorders on families living and having lived with substance users.

Chapter Four: The drug Methamphetamine. This chapter will look at the concept of Methamphetamine with a detailed analysis of what it is as informed by resources given in chapter two.

Chapter Five: Interviews. This will reflect on the interview of participants, analysis of data, presentation, and interpretation.

Chapter Six: Caring Methodologies. This chapter develops the model of narrative and shepherding in the context of Methamphetamine's effects on parents to contribute to a growing scholarship on Methamphetamine's impact and the well-being of users, families, and communities. This chapter will dwell on the healing and caring methods development using some of chapter three works.

Chapter Seven: Summary and Conclusion. This is an integrative chapter, which precisely summarizes the research results and presents final comments on the most important points of the study. At its closing stage, this chapter explores contributions made by the research to the board of knowledge, context-specific recommendations, and suggestions for further research.

1.12 Preliminary Conclusion

This chapter looked at the underlying foundation as well as the research problem on the effect of methamphetamine use on parents: A pastoral challenge. The chapter presented the background, statement of the problem, and objectives were stated. Research objectives were formulated from research questions. Limitations and assumptions were laid out as well as the justification for carrying out the study. The delimitations of the study set the boundary of the research, the chapter outline and some selected terms were defined. The researcher described the issue of dealing with parents who have children who use or have used Methamphetamine in Beitbridge and the surrounding area. The

involvement of children in the harmful use of Methamphetamine worries not only the user but also their families, communities, and parents. Before family and community disintegration spreads, there is a need for effective pastoral care measures to connect with these parents.

A review of relevant literature on the drug will be highlighted in the next chapter. To express varied viewpoints on these parents' experiences as supported by schools of thought, a variety of Western, Asian, and African experts will be featured. In a similar vein, the researcher added his submissions when he compared the dialogues from other sources.

CHAPTER 2

LITERATURE REVIEW

2.0 Introduction

Building from Chapter One, it opines that Methamphetamine is increasingly recognized as a serious worldwide public health concern. As such, the past decade has seen progressively rapid advances in researching the phenomena in the fields of sociology, health, and psychology. Substance harmful use refers to “the use of illicit drugs or other psychoactive substances that produce mood changes and distorted perception” (Nyaga, 2020:12). These drugs are classified into 10 distinct classes according to criteria in DSM-5. These classes include caffeine, hallucinogen, cannabis, alcohol, opioids, inhalants, sedatives, hypnotics or anxiolytics, tobacco, and stimulants (American Psychiatric Association 2013, cited in Nyaga, 2020:12). Chapter 4 will reflect some of these substances in context. However, departing from these conventional studies, the focus is placed on a review of stimulants with specifics to the substance Methamphetamine, which grounds the focus of this study on the in-depth understanding of the phenomenon. This literature review chapter will articulate scholarship discussions on the effects of crystal upon the parents of children using it now or have previously used in the past. The Western, Asian, and African schools of thought will be engaged to obtain an in-depth understanding of the crystal meth in different contexts. This information is central to this study in that it is expected that the experiences related to secrecy, shame and trauma of both parents and pastors alike would be related to these causative factors.

This study’s focus on the pastor-parent alliance is underpinned by a review of the significance of the relationship between pastors and parents in crystal interventions services. The research on parents’ coping strategies is then outlined. This literature highlights that the emotions are widespread among parents of children with crystal meth use disorders pointing to the relevance of the practical theology study. In reality, there is a dearth of research on the lived experiences of parents whose children misuse drugs in some regions of Africa. The research takes into cognizance the potentially negatively biased and stigmatizing terms on the market and proposes the use of pastoral person-

first language. This being the case, Ozer, *et al*. (2017:224) concludes "Language and expressions have a place in stigmatization". Hence, a need to place the argument of potentially negatively biased terms in its pastoral care tenet.

2.1 Crystal Methamphetamine Conceptualization

Asante and Lentoor (2017:1/7) contend that Methamphetamine is the most widely used synthetic drug globally, and has spread rapidly throughout African society Similarly, a study in South Africa found that,

> “The illicit marketplace availability is expanding alongside efforts by traditional high-volume production sources, Mexican cartels and South East Asian syndicates, and in the past Africa has been on the receiving end used as a drug trafficking transit port” (Eligh, 2021:1).

A study which set out to determine Methamphetamine submitted that, "Methamphetamine commonly known as "Meth" or locally known as "tik” in South Africa due to the “ticking” sound produced when smoked and as “Mutoriro” in Zimbabwean local communities, “Is a synthetic stimulant that activates the neurotransmitters dopamine, serotonin and noradrenaline in the brain” (Asante & Lentoor, 2017:1/17; Mukwenha, *et al.,* 2021:1177; Norquist & Spalding, 2012:4). Asante and Lentoor (2017:1/7) exploratory qualitative study conducted in Cape Flats, South Africa, explored the experience of mothers whose children use Methamphetamine complemented the works of Norquest and Spalding (2012) as they state that these are the chemicals that cause people to experience feelings of excitement, euphoria, and alertness. The main argument enshrined within this definition is that the drug is addictive once experimented on and has negative psychosocial effects on the user, which in turn influence the caregivers. The definitions provided in this section provide this research with an in-depth understanding of the substance. Thereby, it advances the admission of Methamphetamine use within the African context and considers its psychosocial impact on parents' well-being as caregivers.

2.2 Crystal Methamphetamine Impact on Parents

The effect of different substances use in the family context may vary, but Sarkar *et al.,* (2016:8) Indian perspective argues that: "One needs to acknowledge that families differ on their structure, composition, their power dynamics, moral and societal viewpoint, and position in the society". Le Cook and Alegria (2015:45) argue, "The hardships experienced by family members are the product of the stressors within the vulnerable social environment in South Africa that are pertinent to inequalities." This claim has been contested in a recent study, which postulates that 38.9% of affected parents belong to the business owner's community (Nyagu, 2020:64). A substantiation of this notion pointing out that, "the disregard of family values by the person addicted to drugs may not only be due to hardships in life but may be driven by the personal attributes such as antisocial behaviour, elicited by the adverse home environment and living in socially disadvantaged neighbourhoods" (Zabeko, 2020:34).

The literature has exposed and challenged the widely held view that the impact of drugs upon parents is to a certain extent associated with socio-economic status. However, the scarcity of studies attempting to assess and address the impact on parents who are unemployed and economically less active remains a void. Zimbabwe's economy is coupled with high unemployment rates, poverty and despair. The rising unemployment and lack of opportunities will make it more likely that the poor and disadvantaged people engage in harmful patterns of drug use, suffer drug use disorders, and turn to illicit activities linked to drugs (Zim Fact, 2021).

A mixed method study, which sought to better understand the experiences of affected friends and family members of people using ice submits "Families providing support to a person with a substance use disorder often experience considerable strain, which can negatively impact many areas of their life including their health and wellbeing" (Sampson, *et al.,* n.d:2/17). In South Africa, a phenomenological study on parents' experiences of their adolescent's substance abuse also found that parents became preoccupied with the adolescent's problems and had to often take leave from work, some eventually gave up working or were dismissed from work (Swartbooi, 2013). Collectively, these studies play a critical role in understanding the experiences of loved ones; however, Swartbooi's

phenomenological investigations in the field of psychology are critical to this current phenomenology discourse desire to make recommendations within the scope of Practical Theology. Building on the aforementioned global literature on Methamphetamine influence trends, the foregoing study confidently asserts that parents as caregivers have an extra burden often resulting in the misuse of substances by their children. In particular, current social challenges posed by Methamphetamine misuse have substantively broadened the distance between users and parents as well as not sparing the community. To this effect, impacted parents have no option but to conform to the reality that substance use disorder is considered a family disease (Sarkar, et al., 2016:7).

2.2.1 Physical, Psychological, and Emotional Effects

Research on the subject has been done by several academics in an attempt to address the question of how Methamphetamine affects parents and the difficulties they encounter. As Sarkar *et. al* argues, "substance use disorder is often considered a family disease" (2016:7). These may include emotional, physical, and psychological challenges and may affect the capacity to provide satisfactory love to their children and uphold healthy connections within themselves, family and friends. The research will go over some of the contributions that these schools of thought have made to the subject under study in this literature review.

2.2.2.1 Physical Effects

According to research, teenage substance uses disorders have a profoundly harmful effect on the user as well as their family members in many significant ways (Sarkar*, et al.,* 2016:7). A qualitative case study design on 'Adolescents and substance abuse: The effects of substance abuse on parents and sibling' conducted in Cape Town opines, "The majority of the participants have endured some sort of physical effect of having a substance abuser within the family" (Dykes & Riefqah Casker, 2021:230). The negative physical effects of caring for an addicted child can be apparent in parents as to the strain they experience. Other harms related to substance use in the family include aggressiveness and violence (Thesnaar, 2011:26-28).

Aggression and violence are terms used interchangeably to describe any type of behaviour or action that has the potential to physically, or psychologically harm another

person (McCann, et al., 2017). A recent example of this injury is submitted in the true story of Ellen Pakkies, which illustrates the lack of human dignity in contemporary society. Dykers & Casker's research submits that South Africans were transfixed by the unfolding true story of Ellen Pakkies, who strangled her meth-addicted 20-year-old son in 2007 (2021:226; Pieterse, 2019; Walker, 2018). She related how their son had abused her and her husband, how he constantly stole their possessions and used violence or threats against them – all to extort money to buy drugs. The gravity of this case emphasizes the need for practical theologians to address substance use problems and any forms of physical abuse within families and communities in a responsible manner. While this narrative raises many concerns as it delves into the soul of our human news when a mother kills her son, Walker (2018) contends two underlying factors: the difficulty of living with a substance abuser; and that any person can be pushed beyond their limits. The Ellen Pakkies story highlights how completely vulnerable a family is when a member is misusing substances and there is a lack of protection and support from community and social services (Pieterse, 2019).

This study adopts the broader assertion presented by Thesnaar (2011:28) who contends that "In the past, practical theologians focused to a large extent on the church environment and were guilty of attempting to deal with these and other complex and challenging issues on its own". Furthermore, literature provided by Cilliers (2006:625) (cited in Thesnaar, 2011:28) indicates that practical theology has large extent traditionally operated within a clerical and ecclesiological paradigm. This research gap invited this study to explore pastoral care interventions and models most appropriate to enter into the space of the injured caregivers since it has grown to be a complex phenomenon in most African communities. In the West, Hall & Bolden (2018) postulates Methamphetamine as a very addictive drug that can seriously harm users' bodies, and minds, and affect the parents of these children.

A broader perspective has been adopted from an Asian perspective, and the school of thought argue that domestic violence is one of the effects that has often been linked to substance use (Sarkar *et al.,* 2016: 8). For instance, domestic violence forms have been taking center stage over the time, and these include abuse of body, the sex, or the mind.

Such violence may take the form of hurting a “ticked” individual or vice-versa the individual attacking the parents, robbing their money or jewelry to enable them to continue misusing drugs Waini, 2015 and Masombuka, 2013 (cited in Mathibela & Skhosana, 2019:93). Commenting on the identical issues voiced in India and the Western scholarship regarding physical effects of crystal meth, the severity of the phenomenon under study is regarded terrible and challenging to manage. Dykers and Casker's (2021) study is relevant for this research, in providing in-depth knowledge on the application of the qualitative case study design and purposive sampling methods which are also applied in this practical theology discourse.

2.2.2.2 Psychological Effects

The following subsection locates the concept of well-being in contemporary literature given that it forms the backbone of this study. A sociological study investigating Zimbabwean migrant women hairdressers participating in informal economic activities in Durban argues the concept of well-being is not a new phenomenon. The researcher charges, “It has widely been used in ageing, social and economic research” (Mhandu, 2018:29). An observation on a study conducted by Clark and Gough (2005:47) (cited in King, 2007:12) reveals that the subjective measures of well-being are informed by achievements and life satisfaction. In the same vein, Mhandu (2018:29) submits, “This means that the subjective well-being can be said to be achieved once sets of the expected needs of people are met”. The most common substances that children misuse, along with the risks involved and issues that can arise as a result, are not well known to or understood by parents.

Furthermore, Peters and Jackson's (2008) works (cited in Choate, 2015:27) point out that parental feelings of guilt do not only focus on the biological roots of their child's problem but are exacerbated by their own parental behaviors and poor decision-making on their part. As a result, parents could feel uneasy about their capacity to mentor their children either before or after learning about substance misuse (Ackard, *et al.*, 2006). This compromises the parents’ well-being, and it will be difficult for them to achieve self-worth. According to Choate's (2015:469) research, carers experience feelings of helplessness and inefficiency as they seek assistance. Parents, for example, felt abandoned and

isolated because they thought their pastors, and communities were judgmental and indifferent to their predicaments. In an attempt to mask their true worth, they frequently conceal their situations, which in turn are detrimental to their well-being. Comparably, longitudinal data sets provided in phenomenological study, which explored the experiences of families with drug-using children, is another important contribution. They discovered that the stress, anxiety, and depression levels among parents of Methamphetamine addicts are very high (Ritanti*, et al.,* 2017:102-105).

Asante and Lentoor's interview sessions, record one of the participant numbers 12 saying.

> **"***I can expect anything to come to my front door*. *They could arrive, one-day knock at my door and tell me that my child was dead or seriously injured, and he was lying in the hospital. I expected the worst. I was traumatized*" (2017:4/7).

These parents display poorer levels of subjective well-being, and their sense of self and personal development were harmed. To put this into perspective, the main argument herein is that the 'expected well-being' of parents of Methamphetamine users underwrites a better understanding of 'Meth' and for this reason, it determines the lifestyle of the parents. Several findings from this research are in agreement with findings from other Western and African investigations. The results of studies on mothers' experiences of living with adolescents with substance abuse problems by Groenewald and Bhana (2016) show, for example, that some respondents reported psychological distress as a result of their son's misbehavior. These studies also support the notion that mothers whose children struggle with substance use disorders suffer psychologically from daily exposure to harmful behaviours.

2.2.2.2.1 Neglect and Abandonment

As Dyba, et al. (2019) states "The large number of people who use Crystal Methamphetamine in Germany are parents of young children." In the context of 'Meth' use, family situations and parenting are frequently impacted, and children are vulnerable to neglect and abandonment. While parenting is cited as a challenge, an African perspective challenges the view of Dyba and others, citing that impacted parents may not

be the primary addict, however, “Methamphetamine addiction frequently causes strained relationships, financial problems, parental responsibility neglect, and an increased risk of child exploitation (Asante & Lentoor, 2017:19)”. The Associated Press retrieved a substantiating response related to neglect and abandonment by one Craig Simba (not his real name) whose fruit and vegetable street sell dream was shattered who opined;

> *“I took to drugs and alcohol to numb the stress,”* he said, adding that his parents *“took me as a madman and kicked me out of the house” (Mutsaka, 2022).*

In India, domestic violence is one of the effects that have often been linked to substance use (Sarkar, et al., 2016:8). Such violence may take the form of hurting a "ticked" individual, or vice versa the individual attacking the parents, robbing them the money or jewelry to sustain the craving thirst of Methamphetamine (Johnson & Brown, 2016).

The dual submissions by Asante and Lentoor (2017) and Sarkar, *et al.* (2016) relate to the study under review by factoring in the plight of parents because of their children, which contextually translates that the problem of meth misuse in India and Zimbabwe is a menace amongst the young population. Dyba, *et al.* (2019) study focus is shifted to the parents' addiction rather than the child; difficulties will arise, however, when an attempt is made to propose a pastoral intervention to the impacted parents, in this case, who are considered not to be Methamphetamine users. Additionally, it can be noted that the parents who are entrusted with parental obligations are already heavily loaded with financial burdens exacerbated by harsh economies of scale; as such, they fail to meet medical and dental requirements (see Eligh, 2021; Marandure, *et al.,* 2022:4).

According to the published research exposed in this section, a direct link that demonstrates the effects of Methamphetamine addiction resulting in parental neglect and abandonment has been obtained. Neglect and abandonment are grave consequences that can arise from Methamphetamine addiction. Together these studies from the West and Africa presented thus far provide evidence that the powerful grip of this substance often leads to neglectful and irresponsible behaviour by parents. As addiction takes hold, parents may find themselves unable to provide the care and supervision their children

require. Given all that has been mentioned so far, one may suppose that the devastating effects of Methamphetamine addiction on both the individuals using the drug and the innocent lives affected by neglect and abandonment cannot be overstated.

2.2.2.3 Emotional Effects

There is no universally acknowledged definition of the term emotion. However, for this study, an excerpt from Denzin (cited by Bericat, 2012) captures the conceptualization of emotion as a:

> *Lived, believed-in, situated, temporally embodied experience that radiates through a person's stream of consciousness, is felt in and runs through his body, and, in the process of being lived, plunges the person and his associates into a wholly new and transformed reality-the reality of a world that is being constituted by the emotional experience. (2012:1-2).*

The main argument enshrined within this definition is that emotions are brief but transform an individual lifestyle. The experience of feeling or emotion ranges from suffering to elation, from the simplest to the most complex sensations of feeling and from the most normal to the most pathological emotional reaction. Often described in terms of positive or negative effects and all were being components of the mind (Lawler, 1999:219).

A study in the USA with nine parents of young people who abuse substances found that parents blamed their substance use for what had happened to their children (Cohen-Filipic, 2013:ix). Parents, as can be deduced from this study experience a significant amount of emotional discomfort, feelings of failure, and helplessness. Participants described having a substance-abusing family member as distressing and creating feelings of defeat; which were emotionally draining and stressful and the two sub-themes show the emotional effects argues Dykes and Casker (2021:231). Furthermore, a study by Mckowen and Harrison (2018), exposed the same themes cited by Cohen-Filipic (2013), and they state that parents of children who use Methamphetamine frequently deal with difficult issues like emotional suffering, and social stigma. Scholars in the Asian context complement each other in highlighting the complex and frequently overwhelming challenges faced by affected parents, and the summary includes the need to balance love

and support with boundaries and consequences (Ritanti et al., 2017:103; Kim, 2019; Sarkar, *et. al.,* 2016).

Of interest to this study are the aftereffects of secrecy, shame and trauma which, according to Van der Merwe and Gobodo-Madikizela (2007: 6) cause individuals and societies to lose the plot. Building on the above literature, this study concurs that understanding emotions is very important and this discourse needs to be explored further in the field of theology in general and practical theology in particular. After closer introspection into the above literature, this chapter submits that a care model on emotions in the context of impacted local parents is lacking. There is no model known to the research that sheds light on the perspective of recovery by pastors in general, and those parents being trans-migrants. In this respect, this study developed a nuanced model in Chapter Six that explains the said phenomenon. Against this backdrop, this study holds that the establishment of a caring model of emotions, which includes secrecy, shame and stigma of affected parents, needs to be undertaken further into contemporary scholarship.

Furthermore, tendencies of social humiliation resulting from children's inappropriate behavior who consume methamphetamine in the home and the community are major discoveries from the various studies which reflected on emotional experiences (Madzvamutse, 2021; Groenewald and Bhana, 2016; Dion, 2014). The parents either felt embarrassment in the face of others or shame in themselves. Indian literature also found that perceived stigma was similar between spouses of alcohol and opioid-dependent patients and those unmarried family members were likely to perceive a greater degree of stigma (Sarkar, *et al.,* 2016:10). They had to seek care for their child in secret, and because of the stigma and embarrassment, they avoided social interaction as much as possible. Parents who worried about being evaluated by others for their child’s drug use behaviour experienced self-shame. The idea is supported by a claim that a shame-based dynamic, which may also be undervalued in a culture, shapes the world (Wimberly, 1999:39). He went on to characterize shame-based personality as the incapacity to distinguish one's reality from that of others (Wimberly, 1999:39). These arguments proposed by these researches are of relevance to this study as they unveil possible

themes to compare with parents impacted by Methamphetamine in Africa because of the children harmful use of the drug in the now and/or in the past.

2.2.2.4 Financial Effects

Drawing on an extensive range of sources, the authors set out the different ways in which meth use disorders may take away a substantial proportion of family income and thus pose a significant financial burden (Sarkar et al., 2016; Ndlovu, *et al*. 2019; Dykers & Casker, 2021 and Norquist & Spalding, 2012). The analysis of the financial impact as delineated from an African perspective shows that the drug places a heavy burden on parents, including increased health and rehabilitation costs and lower productivity argues (Ndlovu *et al*., 2019:1). Likewise, another view holds that Methamphetamine users' parents may go through emotional hardship, interpersonal tension, and financial pressure (Asante & Lentoor 2017:18). One of the participants in a study of caregivers' experiences substantiated the notion by revealing;

> *"I had to stop working because he cannot care for himself…and due to his criminal behaviour, he ended up in front of the magistrate"* (Asante & *Lentoor, 2017:4/7).*

Substance use disorders may take away a substantial proportion of family income and thus pose a significant financial burden. The ability of parents to support and care for their children appropriately may be directly impacted by this financial stress submits Ndlovu *et al.* (2019).

On one hand, the costs of substance abuse include the direct cost of healthcare delivery treating the consequences of use. The validating view states that for people with drug use disorders, the availability of and access to treatment services remains limited at the global level, as only one in seven people with drug use disorders receive treatment each year (WHO, 2018). On the other hand, a South African study revealed that the expenses related to criminal prosecution and incarceration and travelling to and from the treatment center as well as hotel accommodation costs were unbearable (Barnard, 2005; Groenewald & Bhana, 2016:14/17). Given the sparse literature on the financial constraint of affected parents, the Western and Asian contexts in which these researches were

conducted fall short of reflecting the true picture of the impact on parents surviving in a hyper-inflationary economy with a high unemployment rate. This gap is critical for this study to enter the space of the impacted parents with the lens of practical theology-pastoral perspective within the setting of its context.

2.3 Effects Analysis

The idea of *Ubuntu* has been frequently eclipsed by personal ambitions. A submission "The enjoyment of life is part of living as much as *Ubuntu* is part of humanity Masango (2006:930)," complements the notion. Methamphetamine has an especially devastating effect on parents since it frequently has shame and emotional and physical results, which can in turn lead to child neglect, abuse, and abandonment. Emotionally and physically strained parents may find it difficult to cope with the effects of methamphetamine addiction behavior of their child and this can drain them emotionally or financially, which exacerbates the issue. Given that no support and coping mechanisms are put in place, some parents may succumb to drug addiction, suicide, and excessive violence. Sarkar et al. (2015:8) have already opined, "The substance use disorder not only impacts the patient himself/herself but also affects family members." On the other hand, Dada et al. (2015) demonstrated a strong correlation between 'Meth' use and unsafe sexual behavior as well as a higher chance of developing HIV/AIDS among the users. World Drug Report (WDR) (2019:1) reiterates the same sentiments on the physical challenges faced by users and all these problems contribute to the plight influencing the parents as researched in this study. The report claims that there are people who inject drugs; some 11 million worldwide in 2017 and these endure the greatest health risks. More than half of them live with hepatitis C and approximately one in eight live with HIV. The Global Burden of Disease study 2017 estimated that, globally, in 2017, there were 585,000 deaths and 42 million years of "healthy" life lost because of the use of drugs. Around half of the drug-related deaths were attributed to untreated hepatitis C.

These researches highlighted the prevalence of the problems found in different geographical areas but shared the same commonalities in the themes being experienced. However, there have been limited views and an overall lack of research in Africa, particularly in Zimbabwe regarding a pastoral response to the experiences being faced

by families living and or having lived with a person with substance use disorder. Community life remains relevant in African spaces where familial ties are stronger and communal life is embedded in the concept of Ubuntu. Progresses in highly affected societies where Methamphetamine knowledge is rapidly and continuously growing, is anticipated to demonstrate the community's attempts to prevent addicts' deaths. This has been done without much attention to the experiences being faced by family members of the user. This research aims to develop an understanding of the unique experiences affecting families living and or have lived with a person with substance use disorder and how these experiences can be pastorally catered for.

2.3.1 Changes in Family Dynamics and Relationships

Family system theory emphasizes that for a person to successfully receive treatment for a substance use problem, it is important to thoroughly understand how that person functions within the family system, according to a study by Madzvamutse (2021:40). When a person's behaviour changes because of substance use, it disturbs the family homeostasis and affects the social environment, which in turn affects the individual. Choi, et al., (2017) study on family communication suggests that parents can become advocates against their children's drug use by teaching them preventive measures and placing a special emphasis on norms and discipline (Pettigrew, et al., 2018:349-358). In the same vein, Ray, et al., (2009) contend that relatives of people with substance use disorders frequently experience mental health issues. Collectively, these studies outline a critical impact on parents with children using Methamphetamine now or in the past, however, for this study, Madzvamutse's (2021) analysis draws much closer to this study which is exploring the negative lived experiences of these impacted parents as the author discusses the phenomenon within the specifics of her context. Insights can be drawn on this research pointing to the drug's contribution to sabotaging relationships and changing family dynamics. Addiction, mood changes, sleep problems, and the ability to think are possible side effects for users.

Fewell released a study that investigates the impact of this unique addiction on children and families, and this has a bearing on family dynamics (2007:1). The research shed views on parents who use crystal meth and cite the frequency of having poor connections with their children because of neglect, inconsistent parenting, and emotional withdrawal.

This tension may result in disputes between parents and their children, making it more difficult to provide effective pastoral care. A study on the parent-child relationship in the West, (Brown & Hohman, 2016) looked at how crystal methamphetamine usage impacts parental participation and communication. According to the study, parents whose children use or have previously used the substance may have a weakened emotional bond with their children, which can result in feelings of guilt and humiliation as well as difficulties carrying out their parental responsibilities. However, Mathibela and Sikhosana's study in social work, provides an in-depth analysis from an African perspective and they argue that: "sudden behavioural change in adolescents made the parents suspect that something was not right with their children as they saw them behaving in ways that were disrespectful" (2019:93). This view is supported by Waini (2015) (cited in Mathibela & Sikhosana, 2019:93), who observes that adolescents' behaviour may be uncooperative, moody, and even abusive to the parents and people around them. Taking a cue from an insightful revelation provided by Mathibela & Sikhosana, the current study assert that the receptiveness of parents is coupled with stringent precincts between them and their substance-using children (2019:93). In this respect, it therefore becomes imperfect to explore Methamphetamine's impact on parents without including the important questions on the effects of Methamphetamine users' behaviour change. An academic publication in Asia called “Family Functioning and Treatment Needs among Methamphetamine Using Parents: A Cross-Cultural Study” looks at the effects of ‘Meth’ addiction.

2.3.2 Balancing Parenting with Seeking Help and Self-Care

As this scourge is hurting both the global North and the global South of the world, the highly addictive and harmful drug has proved to have catastrophic effects on users and their families, especially detrimental to parents’ love to maintain and secure home environment for the users. Sarkar *et.al* argues, "substance use disorder is often considered a family disease" (2016:7). It is apparent through literature that very few researchers have acknowledged or divulged the plight faced by the families living or have lived with a person with substance use disorder from a pastoral standpoint. The experiences of parents and family members are critical for this research to check how families relate when a child is using ‘Meth’ and what responsibilities in pursuit of other family members in pursuit of quality care have taken.

Sarker, *et al*. (2016) further state that this is more relevant in a country like India where familial ties are stronger with family members playing a significant role in the treatment process. The researcher's inability to enter into the spaces of the parents who are currently affected because of their children's misuse of meth or in the past revealed a pastoral chasm, and this is why the researcher shares Sarkar's sentiments. The share value is in light of the pastoral difficulties designed to adequately address the realities of impacted African parents. According to studies by Klein *et al.,* (2019:964) parents who are living and or have lived with children using substances are more likely to disregard their parental role of providing fundamental basics such as the need for food, clothing, shelter and medical attention. They might also be more inclined to commit physical harm, which would endanger the user. In addition to physical harm, parents who are currently raising or who have previously raised a child who uses crystal methamphetamine may experience several social, spiritual, and mental health concerns that may have an impact on their ability to be good parents. Emotional responses of parents with children using crystal or have previously used can sometimes be volatile, ranging from high irritability to withdrawal and apathy charges (Klein *et al.,* 2019: 964). Mothers and fathers have been found to describe depressive perceptions of their parenthood on the Parenting Stress Index, defined as lacking self-confidence and feelings of self-reproachment in parenting. Further stressors reported among methamphetamine-using parents include feelings of lacking competence in childrearing and perceived demandingness of their children (Klein, & Leyen, 2019).

The silence of the impacted fathers as parents and battling this phenomenon developing in their children leaves a lot of room for critical analysis within African communities, and one can summarise the response as related to detachment from their children. Paneka *et al.,* debunk that parents who are fighting this phenomenon that is destroying their children's lives face a great deal of hardships (2012:2/7). The depth of such hardships is further elucidated by Groenewald and Bhana's research which asserts that parents who seek therapy for their children who use Methamphetamine frequently find themselves coping with a variety of emotional and psychological problems as a result (2015:3/7). The analysis contributed by African scholars reviewed that the severity of these strained relationships may have left some caregivers feeling frustrated and ashamed; hence, a

connection of the objectives of this study is obtained. The qualitative study aims to explore the lived experiences of impacted parents whose children are using crystal now or have previously used it.

2.3.3 Importance in the Pastoral Care Services

There is a growing literature that indicates that the relationship between parents and pastors is of key importance in the delivery of well-being services to both stakeholders (Thesnaar, 2011). With the emphasis placed on the impact of crystal, the following excerpt from Malesic (2017) captures the importance of those who are in the grasp of hopelessness with the caregiver to be in place:

> *"I write this pastoral letter to call the priests, deacons, consecrated men and women religious, and all people of faith within the Diocese of Greensburg to take action against the scourge of opioid addiction. With Jesus, who promises to remain with us, we can reach out in His name to help those who are hurting. We can let them know that they are not alone. We can remind them that they are loved. We can offer to walk with them side by side on the path to recovery. We can help them overcome the isolation and shame they may feel" (2017:3)*

Discussion in the literature about the importance of this alliance is not new, indeed, it has been present in the literature for the past decade. According to Billy Graham Christian (drug addict), Worker's Handbook (cited in Baba, 2022:127), get him or her in touch with a Christian professional counsellor or group experienced in the treatment of addicts. He or she will need on-going help with those personal problems, which led to addiction in the first place. In the same vein, one can submit that pastors can be encouraged to view impacted families as valuable and offer them a comforting presence. The purpose of this phenomenological study fulfils the mandate of developing an understanding of social life and discovering the subjective meaning that people construct and attach to their actions (Asante & Lentoor, 2017). As well, as to understand that both the pastors and the parents are not tabula rasa, but have important knowledge, experience, and abilities that can be helpful to the process of recovery.

2.4 Coping Means

According to the literature analysis, families dealing with their children's Methamphetamine addiction developed a variety of coping mechanisms. Others looked to medical solutions for assistance, while others turned to religious guidance. Another coping mechanism mentioned was joining support groups. To handle the enormous challenge, families discovered ways to strengthen their resilience.

2.4.1 Parents Coping System

A case study in Mitchells Plain, a township in Cape Town, revealed that how a family copes or manages the addiction issue has a profound effect on the way others experience the problem, as well as the course and severity of the problem (Dykes & Casker, 2021:226). In the same vein, findings of a study conducted in the West opines "Experience of stigma on affected family member and friends was evident throughout many shared stories (Sampson, *et al.,* n.d:9/17)". The case submitted herewith, unveils the tendencies of secrecy, shame, and trauma as part of the effects on the patients' families. Consequently, discussions about the stigma of "ice" use and the challenges of public grieving were also added. An argument that “these emotions are significantly heightened by cultural values and societal expectations” was submitted by Ritanti*, et al.* (2017:104). The study revealed patterns of cultural roles as expected by family and community. One of the respondents (P5) points out that, *“…kept silent, please help it…” and* (P4) *“… Do not let anyone rich my child, I wrote enough …”* Such lines of thought find complementarity in social studies deliberations of the parents dealing with community and family (Mathibela & Sikhosana, 2019:96-98).

The coping process has judgmental and shaming consequences. Unlike, Ritanti, *et al.* (2017), Sampson, *et al.,* substantiate the notion with a response from study (P7) who opined that, *"you have to choose what you tell this has the underlying connotations of internalized shame and fear of judgmental conclusions”* (n.d:9/17). The research has been conducted within a Western and Asian environment in the medical field, the concept of family and cultural context differs from the African context, which emphasizes oneness (Ubuntu). Olawole-Isaac, *et al.* concludes "The analysis of substance use is complex, due

in part to its varieties, degree of secrecy, health challenges and different legal connotations surrounding its use globally" (2018:1/6).

2.4.2 Stress, Strain, Coping and Social Support

Global research has gone some way towards enhancing our understanding of different coping means amongst caregivers of children engaged in substance use Orford, (2013) cited in (Dykes & Casker, 2021:231). A crucial submission done by Usher, *et al.,* (2007:422-430) points out that caregivers adopted three types of coping means namely, tolerating, engaging, and withdrawing. In this study, some caregivers opted for engaging whilst others resort to withdrawal as a form of coping with crystal use disorder. Choate found that some caregivers would impound all the drugs from their drug-misusing child, whilst others keenly observe the child (2015:68). Despite these stressful experiences of affected parents, the generalizability of much-published research on this issue is problematic since they were raised in the field of health and medicine. A contextual analysis of the phenomenon in practical theology as opined by this research is critical to avoid scientific studies centered on the drug rather than addressing the participant's psychosocial experiences. "Pastoral care within a hermeneutical paradigm is also deeply about a theology of life and the healing of life," argues Thesnaar (2011:33). Hence, practical theology should therefore develop an ecclesiology to remind the local churches of their vocation and to know how to participate and what their role is when they encounter real-life situations as indicated in the responses of these trauma-challenged parents taking cognizant of stigmatizing language in its healing methodologies.

2.4.3 Religious Coping Support System

Lazarus (2000) claims that coping can either focus on the emotions or focus on the issue. The narratives submitted by the participants had varying responses, which substantiate this notion, and the culture of a context contributed to the response. Additionally, a multicultural viewpoint is necessary to examine how addiction to methamphetamine affects the coping dynamics of families among parents of addicted children Pettigrew, *et al.*(2017:349-358). Taking a cue from Ritanti, et al., who argue that emotions are significantly heightened by cultural values and societal expectations? The study revealed patterns of cultural roles as expected by family and community (2017:104). In light of this,

Sampson*, et al.,* Australian study, records a positive note from one of the participants who named belief as a means of survival (n.d:10/17). In South Africa studies by (Masombuka, 2013; Rebello, 2016) have revealed that parents would often seek religious help believing that the substance issue was probably spiritual. Rabello found that spirituality helped families make sense of a difficult situation. The belief held was that when they handed over the responsibility of the child to God, they were able to distance themselves from the situation and prioritize their own needs. The role of the church would therefore be to restore the human dignity of all people involved - survivors as well as users. In this regard, Soulen and Woodhead argue that human dignity's indispensable context is the church, the gathering of the faithful (2006:6). Claassens (2010) quotes an essay, 'Recovering Human Dignity,' by Christoph Schwöbel, who writes that:

> *The church ought to serve as 'the medium and instrument of God's creative and re-creative action in constituting and reconstituting identity and dignity.' He writes: '… the church of Christ is committed to sharing the situation of those who have lost their dignity in human eyes and to communicate to them the message that their dignity is re-created by the one who first bestowed it upon them. In communicating this promise in speech and action, the church is called to become the witness of the recovery of human dignity because humans are dignified by God (Claassens, 2010:9).*

Although extensive research has been carried out on religious coping means, no single study adequately addresses the recent phenomenon of dual membership among the affected parents. From an insider perspective, faith communities have not been divorced from cultural and traditional beliefs, and some church parents impacted by child Methamphetamine misuse disorder seek the aid of other religions such as African Traditional Religion (ATR) in a bid to exorcise the evil spirit within the child.

2.4.4 Safe Space and Social Networks

Many therapists would agree that in most Western communities and other parts of the global world, community-based support groups are among the most popular resources for parents and families impacted by substance use. Such a claim has been strongly contested in recent years by several writers such as Sarkar and others who from an Indian

perspective argues "Family members play a crucial role in the treatment of a patient suffering from a substance use disorder (Sarkar, *et al.,* 2016:11)." African literature contends that *Ubuntu* philosophy believes in-group solidarity, which is central to the survival of African communities (see Dia, 1992; Mbigi & Maree, 2005:75). The notion of *Ubuntu* is based on an African idiom that says that it takes the whole village to raise a child. It encourages community members to care for and love one another and it always reminds individuals that we need each other to succeed in life (Mathibela & Skhosana, 2019:100). In the same vein, these groups provide a safe and supportive environment for individuals to share their experiences, struggles, and success with others who are going through the same things. Nonetheless, the community-based approach has not escaped criticism on the grounds of trust issues. Taking a cue from the International Organization for Migration (IOM) on challenges of engaging migrants, "Community engagement is not an easy process due to fragmented, scattered and pervaded by a generalized lack of trust due to their experiences" (IOM, 2022:37). The argument is of value to this study, considering the trans-migrants in South Africa whose systems of *Ubuntu* among other factors are shattered due to cultural contextual changes. Substantiating the emphasis placed globally on the effects of Methamphetamine upon parents living or has previously lived with a child with substance use disorder; Mathibela and Skhosana's (2019) excerpt on findings capture participants' responses during interviews:

> *Some parents suggested that communities could support parents by restoring the spirit of Ubuntu, which does not exist in the community any longer. This is explained in the storylines that follow. "I don't think that there is much that the community can do. I guess what is needed in the community is Ubuntu … in our community, people should know that they are laughing today because it's me, but tomorrow it can be another child "Communities have stopped caring about each other and everyone is just minding his/her own business … Yes, we need to go back to our roots whereby your child was my child and people were taking care of each other If we do that, we won't have these challenges because some of the people who are selling these drugs are parents; they have children, but they don't care when they mess up someone else's life. (2019:100).*

At times, the approach cannot fulfil the cultural and social roles and traditions (IOM, 2022:37). The narrative approach proposed as a caring model in this study as proposed by Wimberley (2017) can be drawn from this debate. The concept of rehabilitation centres has since been critiqued in different African spaces, citing tendencies of neglected responsibilities. It can thus be argued with certainty that the lack of support from relatives and communities that parents of children who use crystal methamphetamine frequently experience exacerbates their already difficult condition.

Reflecting on communalism, Mandela cited in the University of Pretoria repository claims, *"Ubuntu* constitutes universal truth, a way of life, which underpins an open society" (2006: xxv). This thesis aims to revisit the concept as suggested by one of the participants, "I believe that our community should go back to Ubuntu and care for one another" (Mathibela & Skhosana, 2015:100). Conversely, a traditional method of resolving disputes known as the Palaver entails conversation, negotiation, and mediation (Mucherera, 2009). He submits that the Palaver *(pachiara, padare*), is a traditional narrative counselling approach common in many traditional indigenous settings in Africa (Mucherera, 2009:2). However, the findings from the *Ubuntu* philosophy would have been more persuasive if the author had considered issues dealing with journeying with affected parents in a fragmented society. The proposal hereby submitted by Mucherera (2009:2) would closely resonate with this study's objectives of advocating for re-village and maintaining the traditional narrative care model cemented on trust.

One can contend that social networking can at times be a better model to enhance sharing and coping means. In the context of Africa, the majority of male parents do not easily reveal challenges, even at the expense of succumbing to the phenomenon. A South African television broadcast program on ETV titled: Man Does not Cry" is a response to alleviate men in confined spaces to be able to open up. According to Choate (2015:472) "Parents sought services from the community that failed to be of assistance." Taking a cue from Masango's assertion that "Enjoying life is part of living as much as *Ubuntu* is part of living" (Masango 2006:93). Mucherera contends the submission citing the impact of hybrid culture (Western and African) leading to most of the African communities torn apart (2017:6-8). Amid such a dialogue, a practical theology discourse maintains that it is

about the contribution of pastoral interpretive guides in transforming individuals, families and communities (Thesnaar, 2011). “I further point out that practical theologians and pastoral interpretive guides have a vocation to participate in transdisciplinary dialogue and he proposes a hermeneutical process, because it has to do with understanding and interpreting the context (Thesnaar 2011:34)”. However, from a contemporary African argument, a relevant paradigm in counselling and pastoral theology of care to address problems experienced by those living in such context is proposed by Mucherara (2017:2).

It is about a process of understanding and interpreting, listening to others, and the ability to be vulnerable in journeying with the impacted families so that they may rediscover their intrinsic worth in the community. There is a crucial need to take into account how the loss of these African civilizational values has affected the capacity of African communities to address this pastoral care dilemma. Therefore, the literature ought to examine how the disintegration of Ubuntu and the Palaver has fueled secrecy and shame in African communities, particularly in the impacted parents. In light of this, the same concepts of restoring the intrinsic value of impacted humanity within the community and the need to regain confidence in safe spaces for shoulders to lean on without being judged are further reflections of this study.

2.5 Mechanism of Coping

Families of Methamphetamine users are exposed to a variety of coping mechanisms, including initial denial and avoidance of the issue. While keeping distance-helped parents maintain their sense of self and let go of the responsibility they appeared to feel for the child's upbringing (Usher, *et al.,* 2007:422-430). A study on the five stages of dying points out denial as a common defense mechanism used to protect oneself from the hardship of considering an upsetting reality (Tyrrell, *et al*., 2023). Taking a cue from Kubler-Ross's (1969) five stages of dying, the study argues that patients would often reject the reality of the new information after the initial shock of receiving a terminal diagnosis (Tyrrell, *et al.*, 2023). The importance of identifying and responding to the psychological health needs of these families affected by meth cannot be overemphasized. Asante & Lentoor from an African perspective study on affected mothers’ states that "efforts should be directed at the development of more formal methods to provide the self-care skills for mothers of

youth who are troubled by drug addiction" (2017:6/7). The evidence presented in Tyrrell and others' analysis fails to account for two aspects, firstly, whether the denial is on the initial shock of observing that the child has become a meth user or secondly whether the denial is on the part of the parent(s) that they need pastoral care intervention. However, covering for a child with a drug misuse disorder implies accepting too much responsibility for the situation. Additionally, the findings of Groenewald & Bhana's (2015) South African study on mothers' experiences of living with adolescents with substance use problems reinforce the discourses, which hold mothers accountable for their children's behaviors. Their in-depth inquiries represented a useful way to give voice to affected mothers and parents in general experiences and to evocate, new dialogues on how these mothers can be supported (Groenewald & Bhana, 2015:15/17). One major drawback of the analysis as highlighted in this section is that all studies were conducted within the field of Medicine and mental health addiction. This study seeks to debunk the effects of this modern-day scourge within communities of faith as they are faced with this struggle. An appreciation of reflected theology on these issues particularly from a practical theology standpoint would be a unique pastoral response to the affected parents, families and communities.

Whilst there is a positive correlation between these three roles, this study is the scope of the mediator and reconciler because the pastoral care model will allow this study to care for the experiences and needs of the parents who are harmed by their children's use of Methamphetamine. This study's attention is drawn to distinct variables affecting human beings and Groth (2015) provides an in-depth study on shame. She argues, "Due to shame's intimate connection to one's identity and the instinct to hide that is connected with shame, shame-based feelings which often lead to one having a shame-based identity impact healing on multiple levels" (2015:12). Shame, whether internalized or externalized, mental instability informing secrecy thoughts and stigma can have catastrophic consequences for users and their parents. In such cases, Gerkin methodology, which involves pastoral listening to the inner life of the individual, will be applicable (Gerkin 1997:88). This view is supported by Groth who opines "Chaplains and other pastoral care providers can listen closely for signs that hiding or defending against shame may be adversely affecting the care one can receive for one's physical and mental health" (2015:20).

A pastor who serves as a mediator can help parents who are affected by Methamphetamine usage communicate and understand one another, resolving disputes and identifying common ground. Between the parents and various support networks, like medical professionals, therapists, or community resources, the pastor can act as a liaison. The broader perspective has been adopted by Zabeko who argues "This way of caring may rebuild the concept of *Ubuntu* in the black township" (2020:6). In support, of the above Mbiti (cited by Zabeko, 2020:6) says, “It takes the whole village to care for a child” (1991:64). Mucherera argues that “African people have always depended on God and the neighbor, as such the traditional Palaver healing/counselling process has not been totally lost and can be easily reclaimed” (2009:x).

In such safe spaces, the emotional, spiritual, and mental development of the impacted parents is taken care of. In essence, the community provides a place for life transitions (Zabeko, 2020:6). Furthermore, the pastor can serve as a reconciler, assisting parents in finding healing and restoration in their relationships with their children, their faith, and themselves. This could be offering them spiritual support, counsel, and emotional, helping them to build self-resilience, forgive, and giving advice on how to re-establish trust.

2.7 Preliminary Conclusion

Another research concludes by pointing out, “Management of adolescent's drug use without paying attention to caregivers, limits our vision and decreases the potential for recovery of a young life” (Cook, 2001). In light of the above literature's indications of various etiological factors at play in parents' development, and co-occurring psychosocial challenges brought on by their children's use of Methamphetamine, the evidence indicates that secrecy and shame are common experiences of the parents. In addition, the critical significance of the parent-pastor relationship is obvious that further research into the points at which these factors intersect is required. Therefore, a qualitative study seeking to give voice to the experiences of parents and pastors around these issues will be conducted. The following research question served as a basis for the study: What are the lived experiences of parents affected by children with Methamphetamine use disorder now or in the past and what are the most effective pastoral care interventions that pastoral care practitioners should use to help affected parents who are now raising or have raised

a child with a Methamphetamine use disorder? Hence, the next chapter will focus on methodology and relevant aspects thereof.

CHAPTER 3

RESEARCH METHODOLOGY

3.0 Introduction

The previous chapter has located the study in empirical and conceptual literature on Methamphetamine in developed and developing settings. The chapter was able to shed light on contemporary debates on Methamphetamine's impact not only on the user's end but also, on its impact on the parents as caregivers. That being the case, the primary goal of this chapter is to provide an overview of the research methodology, including how to collect and organize data for analysis and interpretation. The nature of qualitative research and its epistemological underpinnings will be examined. It will highlight the research methodology used by the investigator to look into how crystal methamphetamine affected parents whose kids' used methamphetamine either now or in the past. It will also describe the procedures used in this study for sampling, data collection, and data analysis. Lastly, it will go over the moral dilemmas raised by study participants.

3.1 The Character of the Research

Wimberly storytelling and Gerkin's process of journeying with help seeker will be buttressed by qualitative method, which will help this research to enter the inner lives of the troubled souls. The qualitative method is extremely important in getting the inner lives of affected parents, due to the lethal nature of Methamphetamine drug within communities and families. These methods will support the investigator in posing pertinent and appropriate questions that will further the investigation. A variety of caring techniques will be utilized in conjunction with qualitative methods such as narrative therapy and the shepherding model to provide an effective plan for caring for the parents who are affected.

3.2 Qualitative Research

The study was conducted within a qualitative methodological framework. To gain a comprehensive understanding of social phenomena (ideas, opinions, or experiences), in their natural setting is the primary focus of qualitative research (Ugwu & Eze, 2023, 2023:20). Qualitatively exploring secrecy, shame, and stigma experienced is meaning making in the daily lives of the affected parents whose children have previously used or

are currently using the drug Methamphetamine. The study will seek to establish how pastors and pastoral caregivers can pastorally care for these affected parents in their time of trauma. Ugwu and Eze submit "Qualitative research is the study of the nature of phenomena, which includes their quality, different manifestations, the context in which they appear, or perspectives from which they can be perceived, but excludes their range, frequency, and place in an objectively determined chain of cause and effect" (2023:20).

Qualitative research relies on the direct experiences of people hence it investigates the why's and how's' rather than what's' of social phenomenon (Ugwu & Eze, 2023, Creswell & Clark, 2011). This is what the principal investigator seeks to achieve with this study. Qualitative research is further defined as "an inquiry process of understanding a social or human problem based on building a complex, holistic picture, formed with words and detailed views of informants which are conducted in a natural setting" (Cresswell, 1994:2). This study seeks to find meanings to inform the researcher`s understanding of the world, to uncover people`s motivation to act in a particular way and explore people's attitudes that inform certain behavior. The principal investigator seeks to come up with a pastoral care model that will help pastors to journey with the affected parents of meth use disorder among their children. Hence, the rationale for selecting the qualitative method is based on the view that the qualitative research methodology dovetail with the aim of this study which is not to test what is already known is justified.

The main goal of this research process was achieved by this approach, which enabled the investigation to access those hidden accounts that are typically buried beneath the surface. The study was thoroughly examined with hidden themes that surfaced from the data gathered being described in detail, thanks to the qualitative research approach (Durrheim, 2006; Parker, 2005).

In other words: the investigator tried to see the world through the eyes of the observer, i.e. to understand life from the perspective of a methamphetamine caregiver (Babbie & Mouton, 2001). Therefore, qualitative methods are viewed as "...descriptive research that uses the methodology of empathy" (Kelly, 2006:378).

The importance of employing a case study was to explore the experiences, perceptions and attitudes of the methamphetamine child caregivers. To gain an in-depth understanding of the experiences and the influencing factors that are faced by these parents of Methamphetamine users, a case study is chosen as a system of inquiry (Ugwu & Eze, 2023:20). “The word qualitative implies an emphasis on the qualities of entities and on processes and meanings that are not experimentally examined or measured (if measured at all) in terms of quantity, amount, intensity, or frequency” (Denzin & Lincoln, 2000:8). Qualitative researchers highlight all the socially constructed nature of reality, the subjective relationship between the researcher and the subject of the study, value-laden inquiry, and the context that shapes the research study. In contrast to the quantitative approach, which stresses the measurement of variables and asserts that the research is carried out within a value-free framework, the focus is on understanding and exploring how social experience is created and how it gives meaning to that situation (Denzin & Lincoln, 2000).

Qualitative research is often criticized merely as an assembly of anecdotal and personal premises, which is strongly subject to bias (Kelly, 2006). Based on his methodological debate, (Silverman 2006, cited in Jantijies, 2010:53) argued that experimental methods in the research of social and psychological phenomena should be abandoned when research studies aim to understand it contextually. Silverman (2006) contends that the qualitative research method is often considered a romantic approach and has constantly defended its reliability. “Qualitative researchers can no longer afford to beg the issue of reliability” (Kirk and Miller, 1986:72 cited in Silverman, 2006). While the forte of field research will always lie in its capability to sort out the validity of propositions, its results will (reasonably) go ignored with no attention to reliability. For reliability to be calculated, it is incumbent on the scientific investigator to document his or her procedure. Nevertheless, the researcher remained mindful of the criticisms, although preponderant comparisons of the quantitative realm heed the objective, where the qualitative method was thought to be most applicable.

3.3 Epistemology Foundation

The breadth of research information in the process is rooted in social constructs that are based on many theoretical viewpoints and the background of this study. According to Patnaik (2013:102), within this framework, it is vital to establish the reliability and authenticity of the research. Epistemology is a Greek word that means theory of knowledge. It is the branch of philosophy, which is concerned with the nature, scope, and limitations of knowledge (Mason 2006:16 cited in Sefatsa 2020:10). The study explains the reasoning behind the research questions and theoretical framework. Accordingly, the research method is determined by the researcher's research philosophy. The emphasis in this part has been on qualitative research that is reflexive and the creation of practical techniques. In doing so, the relationship between the principal investigator and the subjects of the research is examined, and traits that are coupled to create a colonizing discourse are rejected.

Mowat and Swinton contend, "Knowledge of the other occurs when the researcher focuses on a particular individual or group and explores in-depth how they view and interact with the world" (2007:33 cited in Sefatsa, 2020:11). The above statement reflects the study's aim of attaining an in-depth understanding of the challenge faced by pastors and pastoral caregivers, who find themselves unable to journey with Basotho widows after burial. The above analysis provides the principal investigator an understanding of the challenges faced by pastors and caregivers, who are unable to journey with affected parents. The principal investigator engages reflexively to deepen the qualitative research process and its conclusions. Unlike in quantitative inquiry where reflexivity is conceptualized in technical terms, in qualitative research, it is scrutinized in terms of the social embeddedness of the process and politics around the production of knowledge.

3.3.1 Making Qualitative Research More Authentic and Trustworthy

The development of research instruments was grounded on trustworthiness. The selected research instruments had to be appropriate in terms of accuracy, meaningfulness and credibility. Quantitative researchers use universally accepted concepts of validity and objectivity, reliability and validity (that is, internal and external) to evaluate the accuracy and rigor of research. However, quantitative concepts of validity and reliability are not

addressed in an equivalent way in naturalistic work and for this reason; positivists often question the trustworthiness of qualitative inquiry (Shenton, 2004:63). In qualitative research, there are pertinent issues that are raised in interpreting fieldwork results. Argument raised by Pandey and Patnaik view that issues of subjectivity and biases are often raised in this regard (2014:5746). To curb such predicaments, the research utilizes traditional concepts of authenticity (reality/realities) and trustworthiness. Trustworthiness comprises confirmability (neutrality), credibility (internal validity), dependability (replicable) and transferability (applicable) to ensure the accuracy of qualitative findings.

3.3.1.1 Credibility

Credibility simply refers to the confidence that is placed in the accuracy and certainty of the research findings. This concept confirms the extent to which research findings are a representation or reflection of informants' information and that the data interpreted is original. It is similar to the quantitative concept of internal validity, which entails confidence in the truth of research findings (Pandey and Patnaik, 2014:5746). The main idea of this concept is that the research design, research paradigm, selection of participants and methods used to collect data are the best fit for the topic under scrutiny. Thus, research findings should be believable and credible from the viewpoint of the participants. This being the case, one can argue that the credibility of research findings largely depends on the richness of the data than the amount of data gathered. Against this background, it becomes sufficient to argue that the techniques used in this study, in particular, dependability, and member checking provide results that are more credible.

3.3.1.2 Dependability

Dependability is linked to reliability in qualitative research on the other hand focuses on the consistency of results that are being generated from the instruments used (Saunders et al 2012:99). Bitsch (2005:86) conceptualizes dependability as the uniformity, trustworthiness, and integrity of the findings over some time. This assured the researchers that the findings produced by the study were factual. When using reliable instruments, for instance, one should get more or less related results from different individuals when he/she has administered the same questions. This is particularly important for the study and as such, the in-depth interview guides had the same questions

to ensure that there was consistency in the results generated from using the interview guides.

3.3.1.3 Member Checking

A method for examining the veracity of results is member checking, sometimes referred to as responder or participant validation (Birt, *et al*., 2016). In this case, member check entails the inclusion of the parents impacted by Methamphetamine use in the investigation. This was accomplished by presenting the participants with the research findings, interpretations, and conclusions and asking for their comments, suggestions, or affirmation. It enables the subjects to examine and confirm that the study has accurately captured their viewpoints, experiences, and difficulties. Participants have received a copy of the data or results to ensure it matches their experiences and is accurate. One validation technique that is frequently cited is member checking.

3.4 Case Selection

The current study aimed to elucidate the history, and provide a description, as well as the interpretation of the life experiences of the Methamphetamine use affects parents. A single case study design was ample when considering the context of the research. "A work that focuses its attention on a single example of a broader phenomenon is apt to be described as a mere case study" (Gerring, 2004:341). Collaborated with the narrative approach, it can be argued that a case study is the best methodology for this research for its in-depth inquiry on a single unit and the principal investigator aims to explain features of a larger class of similar phenomena. In addition, due to the scope of the study, it being a thesis is consistent with a single case study. This case study aimed to address the paucity of literature concerning the effect of Methamphetamine, specifically on parents as caregivers of children using the drug.

The case study has been favored in this qualitative study because it produces a holistic understanding of rich, contextual, and generally unstructured, non-numeric data by engaging in conversations with the research participants in a natural setting (Ponelis, 2015:537). Also, given the interpretive position adopted in this research and the nature of the research question, the case study methodology was considered the most appropriate approach to employ based on Ponelis who argues that, "In interpretive research, the

number of participants is relatively small" (2015:540; Holloway, 1997). The case study provides an easy systematic way to collect data, analyze information, and report the results, thus understanding a particular problem or situation in great depth. Substantiating the notion, Yin highly recommends that novice researchers begin with a simple and straightforward case study (2009:162). Employing a case study in exploring the impact of 'ice' upon parents- a pastoral care challenge will be critical in advancing the field's body of knowledge in pastoral care tenets and supports both theory building and theory testing (Merriam, 2009).

3.5 Thematic Theory Application

Raw data from the interviews conducted will further be interpreted using a thematic analysis approach. In a study, which set out to guide English Language Teaching (ELT) in Nepal, Dawadi (2020:62) defined thematic analysis as "A qualitative research method that researchers use to systematically organise and analyze complex data sets". Thematic analysis will highlight themes in this study that represent the narratives found in the data sets of accounted and affected participants. The transcribed data will undergo a thorough and merticulous reading and re-reading, as noted by King (2004 cited in Dawadi, 2020:62). The data will coded inductively (bottom-up) without attempting to fit the topics into a pre-existing coding framework. Themes that are closely associated with the data will be grouped through thematic analysis, as opposed to the principal investigator's theoretical interest in the subject (Dawadi, 2022:63). The themes will help the study to deduce a pastoral care model suitable to journey with the affected parents.

3.6 Time Horizon

A decision that has to be made early on in research relates to whether the research is going to be a ‘snap-short’ taken at a particular time [cross-sectional] or a ‘diary’ or representation of events over a period [longitudinal]. To this end, Leedy and Ormrod describe three-time scales, which are cross-sectional, longitudinal, and cohort-sequential studies (2010:189). The function that time fulfils during one's study is referred to as a time scale. A cross-sectional study examines characteristics or variables at a specific point in time while a longitudinal study examines characteristics or behavior over a prolonged period (Leedy and Ormrod, 2010:190). A cohort-sequential study begins as a cross-sectional study but transforms into a longitudinal study as it continues in the same fashion.

However, a cross-sectional study will be pursued for this study largely because of time and cost constraints, as studying the whole of Africa requires a great amount of time and resources. In addition, a cross-sectional study is to be utilized because it augers well with the survey approach.

3.7 Data Collection Techniques

3.7.1 Target Population

According to Magwa and Magwa (2015:6), the target population refers to a large collection of individuals or objects underlying the focus of the inquiry. It can be argued that the target population is the total group of individuals or elements from which the sample is drawn (Creswell, 2011:42). It is therefore a particular group of people for which the results of the study will be generalized (Denscombe, 2007:43). For this study, the target population consists of the community of Beitbridge, pastors and parents relevant to the study.

3.7.2 Sampling Technique

Saunders *et al* (2012:95) outline that it is not feasible to study every element in the population; hence, the researcher will make use of a representative sample. The representative sample for this study included two separate subgroups: parents of children with meth misuse disorder now or had previously used it in the past and pastors who provide pastoral care services to both these parents and the children. Purposive sampling combined with the snowball sampling technique has been utilized to recruit participants from faith communities whose children's substance use has been a challenge. As stipulated by Leedy and Ormrod (2010:190) when conducting purposive sampling the researcher uses personal judgment to select subjects that are considered representatives of the population. The researcher identified participants who were relevant to the study and then expanded the sample group through referrals of participants they knew will meet the same criteria, (Creswell, 2014). One participant from the pastor's sub-group recommended an interview with one parent participant. With the help of this technique, the researcher managed to connect with a wider range of possible participants who were not simple to contact using purposive techniques due to the nature of the secrecy of the phenomenon under study. The research was conducted on biological parents of children

with meth use disorders whose indications seem to experience more shame (self and community) and trauma of stigma (self and community). The study considered excluding foster parents, custodial parents, and other relatives, however, given the desire in qualitative research for maximum variation within the sample, all custodial caregivers were eligible to participate in the study.

3.7.3 Sample Population

A sample of 3 pastors and 4 parents was purposefully selected to unveil experiences and knowledge on the effects of Methamphetamine upon parents having children using meth now and/or in the past. The sample size was by the principle of data saturation (Saunders, *et al.,* 2018), and data saturation was achieved with a sample size of 7-15 participants, according to numerous studies in descriptive phenomenological research (Aguinis & Solarino, 2019).

3.8 Research Instruments

3.8.1 In-depth Interviews

Data was collected through audio-recorded, semi-structured, individual interviews as is common in phenomenological research. Weitz (2014:97) note, “In-depth interviews are a flexible data collection method where the researcher either records or takes notes during the interview”. While some phenomenological researchers may opt for unstructured interviews to allow conversation to go any direction (Moustakas, 2004) the choice of semi-structured interviews allowed this study to focus the participants on their lived experiences in the context of the study. Information obtained through this technique is not open to statistical analysis. It is important to note that the setting, which, in some instances, consists of the persons present, influences any interview’s outcome. Over four weeks, one-on-one face-to-face interviews were conducted. Gill, et al. (2008:292) argues, "Length of interviews varies depending on the topic, researcher, and participant." However, on average, healthcare interviews last 20-60 minutes (Gill, *et al.,* 2008).

It is essential to note that exploring the psychosocial impact of Methamphetamine trauma on participants and the subsequent experiences may require a repeated session, and this research endured such predicaments. A one-on-one approach made it easier to connect,

develop trust, and spot any non-verbal indications that called for more in-depth inquiry. According to the preferences of the participants who were currently living outside of the country at the time of the interview, two of the seven interviews were conducted telephonically via WhatsApp video chat and consumed less time (Farooq, 2015:15). This was the best way in which respondents would reflect deeper into personal aspiration, feelings, and experiences and for this study to obtain the information relating to the Impact of Crystal Methamphetamine upon parents: A Pastoral Care Challenge. The in-depth interviews were chosen as a data collection method as they allow for direct contact with the respondents and provision of clarification where needed and assist this research in obtaining the desired information that helps in understanding the research topic.

To this end, this study was acquainted with the participant's cultural environment and their status as impacted parents and concerned pastors. This motivated the principal researcher to enter the field with a level of understanding of participants' linguistic variability and treat them as participants and not subjects. The majority of the research participants selected the interview location. Most of the interviews were carried out at their houses and offices as per the will of the study participants.

3.8.2 Data Sources

Primary data and secondary data were the two data sources that were utilized in this study. Primary data was largely utilized, and secondary data was employed to complement primary data. The research needs a fresh and clear explanation and description, which the researcher cannot achieve through minimal secondary data. Primary data will be sourced from the community surrounding the border town through in-depth interviews. Secondary data sources such as extant literature, which are relevant to the topic being observed, will be also used to answer the main research question.

3.8.3 Data Analysis and Presentation

In terms of analysis of qualitative data, thematic analysis will be used. It will be used for analyzing data from the interviews, as data will be grouped into emerging themes. The researcher will begin by identifying persistent patterns to identify possible themes. After that, the researcher will subdivide the data collected into several elements that will be recurring. The analyzed qualitative data will be presented in the form of explanations.

Nueman (2007:67) refers to the data presentation stage as the "data display stage" where data is organized, compressed and assembled. According to Hayes (1997:12), data reporting can be presented in both textual and visual formats such as graphs and tables. Thus, data collected from the interviews will be presented in the form of a textual report. This will be done in a bid to simplify interpretation and in the drawing of conclusions.

3.9 Ethical Considerations

The scholarship of research ethics helps prevent research abuse, and exploitation of participants, and supports researchers in understanding and accepting their duties as ethical academics. This argument is supported by Bless*, et al.;* (2013:28) who claim that research ethics emphasizes the humane and sensitive treatment of participants who to some extents are predisposed to various levels of risk by research procedures. The study observed certain ethical issues. Ethics are rooted in ancient Greek philosophical inquiry of moral life and refer to a system of principles, which can critically change previous considerations about choices and actions (Fouka and Mantzorou 2011:10). By extension, ethics is the branch of philosophy that deals with dynamics of decision-making concerning what is right and wrong.

Thus, to curtail participants' risks, throughout this research, this study observed important principles of research ethics. Relevant to this research are anonymity, non-maleficence, and autonomy. Throughout the research process, the principal investigator was supportive of participants and avoided being judgmental. This entails avoiding any negative sentiments that may harm the research participants. Despite the fact, the study participants might be disclosing terrible things that may have happened or are still happening, the principal investigator reassured them that they were not at fault and probed further in a way that was not either offensive or harmful to the participant. The principal investigator made provisions in place that he be pastorally cared for in case of disturbing emotions, and the supervisor was on standby to cater for the counselling and care.

The study also adhered to the ethical rule of non-maleficence, which ensures that the participants are not unintentionally or intentionally harmed by the study's findings, drawing on Bless*, et al* (2013) and Wassenar (2006). To achieve this, this study protected

participants' identities and minimized the potential of stigmatization given their community standing by using pseudonyms. According to the principle of anonymity, which was closely tied to confidentiality, researchers are required to make sure that participants' data created remains anonymous (Bless*, et al*., 2013:33). To prevent data loss or danger that might befall the research subjects the study will take careful precautions to secure the data collected. As a result, raw data will be confined to the researcher, the participants and the research institution only for the purposes of this study. The relevant data will be destroyed, should the participant choose to withdraw.

In addition, informed consent was implemented among the participants in this research. According to Armiger (1997:31), informed consent means that a person knowingly, voluntarily intelligently, and clearly and manifestly, gives their consent. About informed consent, the researcher explained to the participants the research process (Creswell, 2009:94). As such, the participants signed on the interview guides as a mark of their consenting to participate in the research and they were reminded that they could withdraw as any point when they feel like obligated to withdraw.

3.10 Narrative Approach- Edward P. Wimberly

According to Wimberly (2017:2), the narrative approach influenced the telling of stories of the Concerned Black Clergy (CBC). Narratives "Operate as an instrument of the mind in the construction of reality" Brunner (cited by Russo, *et al.,* 2021:3/19). Similarly, a story is a special kind of narrative with a certain very specific syntactic shape (beginning-middle-end or situation-transformation-situation) and with a subject matter, which allows for or encourages the projection of human values upon the material Scholes (cited by Russo, *et al.,* 2021:3/19). As a method, narrative inquiry is a form in which stories themselves become raw data, and the stories tell the individual experiences that often expose the researcher to the identities of that individual (Butina, 2015:190). “Each person is a collection of stories” (Dinkins 2005:11 cited in Sefatsa 2020:14). In this study, the principal investigator seeks to understand the identity of affected parents through their narratives. The affected parents whose children have previously used or are currently using meth will be narrating their stories, they will talk about their experiences, which will help us (pastors) in giving us direction on how to help and minister to other caregivers in

similar situations. McAdams (2008) defined narrative identity as an Individual's internalized as such he posits that:

> *“Stories we construct to make sense of our lives are fundamentally about our struggle to reconcile who we imagine we were, are, and might be in our heads and bodies with who we were, are, and might be in the social contexts of family, community, the workplace, ethnicity, religion, gender, social class, and culture writ large” (McAdams 2008 cited in Butina 2015:191).*

Wimberly uses distinct vocabulary to explain his storytelling approach. For example, when he was building the two distinct traditions of parable and metaphor in pastoral counselling and preaching, he posited that "the convergence recognizes that reality and the ways of knowing reality are storied, and changing one's view of reality requires attending to people's stories" (Wimberly, 1999:16). In light of this view, narrative method provides a positive ground for counselling as an advantage. Beeselaar substantiates this notion as he argues, "The narrative method of story-analysis and the interpretation of stories have many advantages for counselling" (2011:105). Narrative therapy and externalization are inseparable. Narrative therapy will be useful in helping the affected parents to externalize the problem "Externalization is the decision to face the pain caused by privileging negative stories and conversations" (Wimberly 2003:28). Some of the affected parents have experienced negative conversations and consequently, they are traumatized. Some do not even consider coming to spaces of worship and attending church because of the perceived judgement of parental negligence and assumed stigma. Tuwe argues that African storytelling is essentially a communal participator experience, and phenomena and people participate in accounts and stories of wisdom and counsel (2016: 4/18).

Wimberly’s narrative approach seeks to illustrate how Jesus sought to engage the world in a bid to transform what was not God's intended way of life. On the other hand, Zabeko argues, "In this kind of storytelling the initially suppressed and silent voices are accorded consideration" (Zabeko, 2020:7). It will be an abortion of justice to end the conversation on storytelling without reflecting on the essence of narratives within African spaces. "Africans are primarily oral people" (Tuwe 2016:3/18). Tuwe furthermore submits that "oral stories of African people have been woven out of the substance of human

experiences, struggles with the land and elements, mysteries of existence, and life or death" (2016:3/18). Wimberly upheld the necessity of telling contemporary stories to tap into the experiences of people and begin to visualize that God is at work in our lives, bringing healing to shame and our emotional wounds (Wimberly, 1999:12). There is a connection of this notion with the secrecy experiences of affected parents under study. The use of Methamphetamine by their children has been judged as a menace within internal family structures and as well external community structures thereby closing confining opportunities because of shame.

Because of the cases being analyzed in this study which bring the story of secrecy, grief, shame and stigmatization, the narrative will help this study to advocate for the recreation of conversational spaces which stand in wisdom of responding to trauma and help to heal persons and transform communities (Wimberly 2017:20). This approach is effective as African communities' responses to circumstances is embedded in storytelling and seem to have a positive therapy to the affected parents. In storytelling, Wimberly uses the model of Jesus Christ to enter into the space of life of the people who are troubled, without judging them at all, but to begin to open up a new way in which they will be brought to the center from the periphery (Wimberly, 2017). These experiences can be recorded systematically using both traditional and contemporary methods such as artefacts, videos, diaries, interviews, journals, letters, and many others (Walshaw, 2012:67). This study has employed interviews to systematically record the narratives and using a mobile phone as a data-recording instrument. To this effect, the current study seeks to utilize Wimberly's' storytelling approach as a means of entering into the space of the impacted parents whose children currently and harmfully use Methamphetamine or have previously used it. In light of the stories, this study will then bring Gerkin to enter as a shepherd to these affected parents and allow the principal investigator to journey together with them. In addition, as people learn from each other stories, the effectives of the process will help pastors to heal these affected parents and pursue justice. Gerkin (1997:25) substantiates the notion, "Care for the people of God involves care that confronts issues of justice and moral integrity in the life of the people". Story telling leads us into Gerkin's journey of shepherding, which will help the researcher to journey with the troubled souls.

3.11 Shepherding Approach- Charles V. Gerkin

The biblical shepherding motif of Psalm 23 as abused by Gerkin (1997) collaborates well with the narrative approach in journeying with Methamphetamine-impacted parents. In light of the research topic "The Impact of Crystal Methamphetamine upon Parents – A pastoral care challenge," The role of the pastor as a mediator and reconciler will be opted among Gerkin's three roles of creative balance in a new dimension of pastoral care Gerkin (1997:79-83). Gerkin points to the role of the pastor as a shepherd of the flock as a depiction of Jesus being the good shepherd who knows his flock and is known by his sheep (John 10:14). Regarding this role, Gerkin places a strong focus on the pastoral relationships we have with both the strangers we meet along the way and the people who are directly under our care (1997:80). In order to assist pastors in tending the flock via their relationships, the shepherding element was required. In Africa, shepherding is a prevalent and well-recognized approach to flock management.

The common entry is shepherding which help pastors and pastoral caregivers to connect with widows and pastorally will care for them as members of the flock (Sefatsa, 2020:18). In addition, Gerkin argues on the role of the pastor as a ritualistic leader and his emphasis was on the connections between liturgical practices (receiving bread and wine, laying on of hands, administration of water baptism and singing together) and life experience (1997:82). It entails some care can only be given the power through deep connection with communal meanings by way of corporate participation in the liturgical symbolic acts. Whilst there is a positive correlation between these three roles, this study limits the scope to the mediator and reconciler because the pastoral care model will allow this study to care for the experiences and needs of the parents who are harmed by their children's use of Methamphetamine.

Groth draws this study's attention to distinct variables influencing human beings and she provides an in-depth study on shame. She argues, "Due to shame's intimate connection to one's identity and the instinct to hide that is connected with shame, shame-based feelings which often lead to one having a shame-based identity impact healing on multiple levels" (Groth, 2015:12). Shame, whether internalized or externalized, mental instability informing secrecy thoughts and stigma can have catastrophic consequences for users

and their parents. In such cases, Gerkin's methodology, which involves pastoral, listening to the inner life of the individual, will be applicable (Gerkin, 1997:88). This view is supported as opined "Chaplains and other pastoral care providers can listen closely for signs that hiding or defending against shame may be adversely affecting the care one can receive for one's physical and mental health" (Groth, 2015:20).

A pastor who serves as a mediator can help parents who are affected by Methamphetamine usage communicate and understand one another, resolving disputes and identifying common ground. Between the parents and various support networks, like medical professionals, therapists, or community resources, the pastor can act as a liaison. The broader perspective has been adopted in South African scholarship argues that "this way of caring may rebuild the concept of Ubuntu in the black township" (Zabeko, 2020:6). In support, of the above Mbiti (cited by Zabeko, 2020:6) says, “It takes the whole village to care for a child” (1991:64).

“African people have always depended on God and the neighbor, as such the traditional palaver healing/counselling process has not been totally lost and can be easily reclaimed”, argues Mucherera (2009:x). In such safe spaces, the emotional, spiritual, and mental development of the impacted parents is taken care of. In essence, the community provides a place for life transitions (Zabeko, 2020:6). Furthermore, the pastor can serve as a reconciler, assisting parents in finding healing and restoration in their relationships with their children, their faith, and themselves. This could be offering them spiritual support, counsel, and emotional, helping them to build self-resilience, forgive, and giving advice on how to re-establish trust.

3.11 Preliminary Conclusion

This chapter has presented the research methodology. Key aspects of the methodology discussed in this chapter include research philosophy, research design, and target population, sampling, data collection, analysis and presentation as well as ethical considerations. Taking a cue from Patton (2002) it is important to reflect on the purpose of the inquiry and the types of answers you seek when selecting a research design (Patton cited in Butina, 2015:190). The study investigates a qualitative case study strategy to explore the Impact of Crystal Methamphetamine upon parents: A Pastoral Care

Challenge. Non-probability sampling methods such as purposive sampling are to be used. Data collection will be done through in-depth interviews. The investigator intends to employ the narrative method as well as hermeneutics will inevitably be involved in this investigation given the need to interpret the interviewees' stories and certain biblical passages. Wimberly narrative model is proposed to enter into the spaces of lived experiences of the affected parents whose children have used or are currently using Methamphetamine. The shepherding model proposed by Gerkin will be utilized as well as a caring model. Since Wimberly's narrative does solicit stories which may traumatize experiences, Gerkin's model of shepherding does propose journeying with the wounded in its shepherd motif, hence its adoption. The element of Shepherding is needed to help priests care for, or shepherd, the flock through their leadership. The next chapter presents and discusses the drug Methamphetamine. This chapter will look at the concept of Methamphetamine with a detailed analysis of what it is as informed by resources given in chapter two. The research will positively help pastors and caregivers to get ready to journey with the parents who have previously or are currently living with children experiencing drug use disorders.

CHAPTER 4

CRYSTAL METHAMPHETAMINE IN PERSPECTIVE

4.0 Introduction

From famous scholarly perspectives, chapter 2 of the current study has examined the effects of methamphetamine on parents of children who are currently using or have previously used the drug. Literature opined that the detrimental impact of drugs in general and Methamphetamine in specific upon parents in both the global North and global South thereby posing a severe health challenge. It will be an abortion of justice to enter into the spaces of pastoral intervention on the major themes expounded in the findings without an in-depth knowledge of the phenomenon under study. This section delves into the real exposition of other drugs and substances in general and the drug "Methamphetamine" in particular. Introspection of other drugs posing an addiction challenge thereby having some effects upon parent's, intrigues this study to look into the phenomenon taking precedence within African civilizations that are enmeshed in the vicious cycle of drug and substance misuse. Thesnaar (2011:34) states, "These real-life stories are very complex, extremely difficult to deal with, and the road to recovery is always a challenge, given the legacy of the past devastating effects of this harmful cycle".

4.1 Drugs in Retrospect

The Zimbabwe Council Liberative and Drug Network report the harmful consumption of alcohol, drugs, and other substances abuse (UNICEF, 2023:3). A local newspaper substantiates the fact, and it states that the commonly abused drugs include Methamphetamine, Droshky, Diazepam, Cocaine, Glue, Marijuana (mbanje), Broncleer, and embalming powder (Muleya, The Herald, 2 November, 2018).

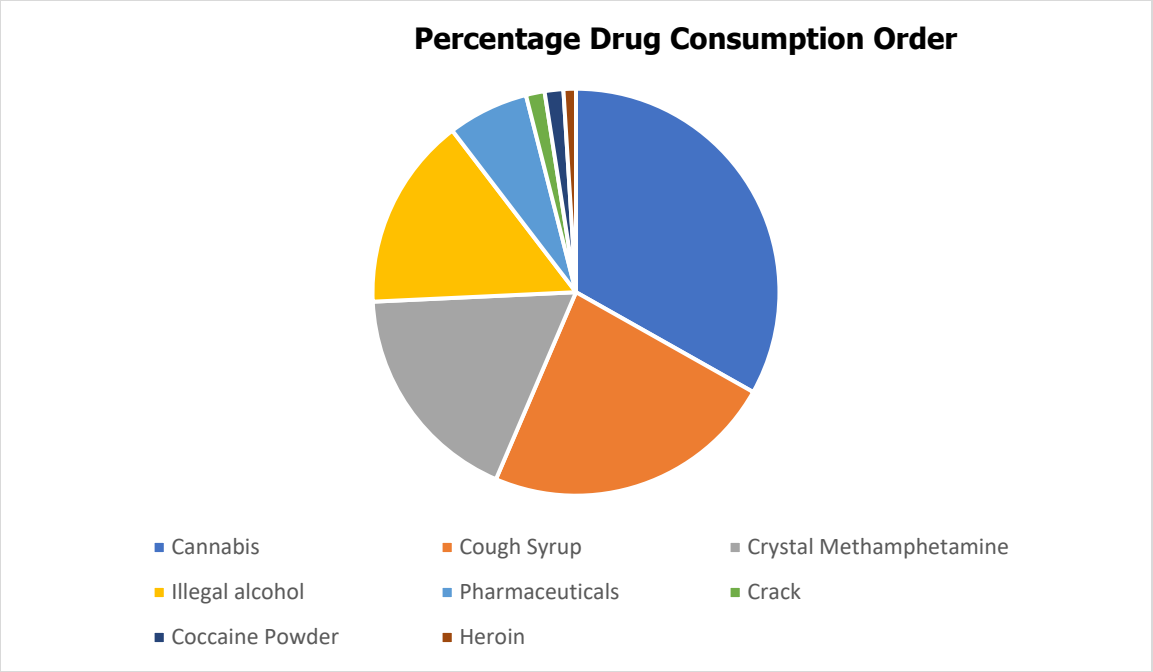

Figure 1.3 Percentages of drug usage: UNICEF (September, 2023:4).

According to Kahuthia, Okwarah, Gakunju, and Thungu the drug scene is constantly changing due to the increased pursuit and dismantling of production and distribution chains of frequently abused drugs (Kahuthia et al., 2013 cited in Kosgei *et al.,* 2021:34). The cost of alcohol is very low with users spending $2 to satisfy their needs (UNICEF, 2023:4). In Beitbridge, the cost of meth sachet per gram has been packed at R100 whilst convenience smaller sachets are available at R50. It can be argued that recent trends juxtaposed to economic hardships have made it difficult for the users to afford to buy alcohol in registered bars. Furthermore, Kosgei et al., submits, “There are new drugs that are being developed to outsmart and counter the progress made by authorities” (2021:34). As a resort, the cost of Methamphetamine sachets is very low with users spending at most R5 per snorting cycle to satisfy their needs. Drug and substance harmful consumption is high in urban areas than in rural areas. UNICEF argues that the stronger community childcare system and closer parental care that prevail in rural communities gives the competitive advantage (2023:4).

From this, it is clear that addiction is a menace within society, and the substance of addiction varies. For instance, some individuals are reported to be addicted to prescription

drugs, such as opioid drugs meant for pain relief (i.e., Morphine, OxyContin, and Vicodin), central nervous system depressants (Xanax and Valium), and other stimulants (for like, Concerta and Adderall) (Kosgei, *et al*., 2021:34). The highest abused substance in Kenya is reported to be alcohol, and opioids such as; heroin and cocaine, stimulants such as methamphetamine, tobacco, khat, and hallucinogens such as bhang (Kosgei, *et al.,* 2021). The use of these drugs may have started as leisure activities; however, people slowly grow dependent on the drugs for the functionality of day-to-day activities. Despite the fact that marijuana is the most used drug as indicated in the pie chart above, its addiction effects is not as high as Methamphetamine. Broncleer, which contains codeine, is one among the commonly used substances in Zimbabwe (Mukwenha, *et, al.,* 2021). Broncleer itself is a prescription cough syrup that contains a combination of alcohol and codeine. According to North Jersey Recovery Centre (2020) when codeine is misused, the body develops a tolerance-turned into dependence and one has to take more to have relief have effects of making one feel happy, relaxed, and euphoric (Centre, 2020). The tolerance or acceptance means the drug will not work as efficiently; however, it distresses one's physical and mental health, leading to anxiety, aggression, hallucinations, depression, and paranoia argues Moyo (2021). The paucity of in-depth studies on the effects of these prescribed opioids upon parents of users contributes to the necessity of this research.

Zabeko's research contends with the high usage of local made *nyaope* in black-townships of South Africa (2020:123). "The *nyaope* epidemic in South Africa as "worse than the current unemployment, HIV and AIDS crisis put together" (Gosh 2013:71 cited in Zabeko, 2020:123). *"Nyaope*, is a Sotho word meaning, "You are going nowhere," has become the "drug of choice" among thousands of youths across South Africa" (Hookins, 2014:67 cited in Zabeko, 2020:123). Plüddemann *et al* explain that "Heroin is mixed with a variety of substances and is called "*Nyaope"* in Pretoria, "Sugars" or *"Whoonga"* in Durban, *"Ungah"* in the Western Cape and "Pinch" in Mpumalanga" (2006:43 cited in Zabeko, 2020:123). The same concept of using guise names to *nyaope* seem to have manifestations on the drug crystal and in the street corridors, it is known as "ice, *guka, mutoriro*, tik". To further compound this, local production is now also rampant with drugs such as *Musombodia*, a colourless highly intoxicating drink made from ethanol and

emblements powder, which is being illegally manufactured and distributed throughout Zimbabwe (Mukwenha, *et al.,* 2021). In pursuit to get high on a very cheap budget, there have been reports of new substance inventions such as diaper juice drinking, bath soaps, fermented mixtures of cerevita and mazoe orange crush and these opines an avenue of new areas of research, which will not be catered in the current study. Experts say the prevalent drug misuse and innovative new ways of it highlight a lack of social nets as Zimbabwe's economy continues to tank (Manika, 2022). An Aljazeera snapshot footnotes revealed youths lying down by the road in a suburb of Harare, capital of Zimbabwe after drinking sodium polyacrylate or *muto we mapambers* (Shona for "juice of pampers/diaper") (Manika, 2022)

However, research done in Cape Flats, Western Cape in South Africa posits that, "Methamphetamine is perceived as the fastest growing addictive substance ever introduced into the market, and at some point, has even exceeded commonly used drugs such as dagga, mandrax and ecstasy" (Asante & Lentoor, 2017:1/7). In the Western community, a study conducted in Australia opined that, the heroin shortage in 2001 led to an increase in the number of heroin users who inject Methamphetamine. In addition, some Methamphetamine users are former heroin users; others use Methamphetamine in conjunction with heroin. However, heroin users who also use Methamphetamine represent only a small group of Methamphetamine users (Drabsch, 2006:6). The time rate for getting 'tikked' when Methamphetamine is snorted, injected or swallowed is faster than any other substance hence it has been given the name 'speed' (Drabsch, 2006:4). Zabeko from an African perspective argues, "Methamphetamine is addictive and users can develop a tolerance quickly, needing larger amounts" (2020:130).

4.2 Crystal Methamphetamine Overview

4.2.1 Definition of Crystal Methamphetamine

While a variety of definitions of the term Methamphetamine have been suggested, this paper will use the definition suggested by NIDA (2019:3) states, "It is a powerful, highly addictive stimulant that affects the central nervous system." Previous research by Drabsche has subscribed to the belief "Crystal Methamphetamine is a synthetic stimulant that activates the neurotransmitters dopamine, serotonin and noradrenaline in the brain"

(2006:3). These chemicals cause people to experience feelings of excitement, euphoria, and alertness. Although these researches share some commonalities on the phenomenon under study, there is very little scientific understanding of the phenomenon in the definition, which summarizes Methamphetamine as a drug which speeds up messages travelling between the brain and the body (NIDA 2019:3). Hence, the subscription to the definition has opted to simplify its scope in this practical theology research.

Recently, researchers have shown an increased interest in Methamphetamine and have provided this research with the typical form of the drug. According to Norquist & Spalding, "Methamphetamine commonly known as "Meth", comes in a granular or powder form, it can also be manufactured in chunks known as Methamphetamine and also referred to as "ice", shabu, shard, or “glass” (2012:4). Additionally, Murray (2019) submits that Pseudoephedrine, a chemical component of over-the-counter cold and allergy drugs, is typically used in illegal, covert laboratories to create Methamphetamine. According to Murray, "Meth intake can be smoked, snorted, injected, and swallowed intravenously. The effects can be felt in 3-7 seconds when smoked or injected, 15-30 minutes when swallowed and 3-5 minutes when snorted” (2017:1). Additionally, meth comes as small chunky clear crystals that look like ice, which resembles glass shards or bluish-white pebbles (Murray, 2017). There is a consensus among Zimbabwean researchers that Meth is locally referred to as “*mutoriro, guka, or dombo (Shona for stone)* due to the crystalline structure (see Mukwenha, *et al.* 2022:1177, Webmaster, 2021). As a local investigator, an observation of meth being associated with the term stone can be deduced from the local common name given to precious gems like diamonds or gold, as they are found in different places in Zimbabwe but rarely accessible to many.

4.2.3 History of Crystal Methamphetamine

Norquist & Spalding, traces the development of crystal meth history during the 19th century, in Germany, when a Romanian chemist Lazar Edeleanu initially synthesized the chemical Amphetamine in 1887, which is where Methamphetamine gets its name (2012:7-8). However, Methamphetamine wasn't created until the 1910s and, in 1931, the Japanese pharmaceutical firm Dainippon Sumitomo is claimed to have begun selling

meth under the name 'Philopon' a coined word, combining the Greek Philo (love) and ponos (labour), to mean "love of work" (see M, 2014). In the introductory part of its report, it is suggested, "Meth was first employed as a bronchial inhaler and nasal decongestant before its stimulating effects on the central nerve system came to light" NIDA (2022:3). Second World War 11 recorded high volumes of meth, as it was believed that it improved military alertness and reduced combat weariness (see Parsons, 2013). In light of all that has been mentioned so far, one may suppose that the intended use of the drug has been violated over the years as such, young people are misusing the stimulant for a variety of reasons, such as pressure from peers and socio-economic crisis within communities.

Findings exposed by Eligh claims "The illicit marketplace availability is expanding alongside efforts by traditional high-volume production sources, Mexican cartels and South East Asian syndicates" (2021:1). Beneficial to this research, is the discovery, which Eligh highlighted as a major challenge resulting from these clandestine laboratories. Of all the organized crime types, meth trafficking is the most dangerous and most profitable hence it underpins the growing power of these groups (Eligh, 2021). This analysis may to a certain extent hint at the growing factor in the spread of Methamphetamine within border town communities.

In Zimbabwe, it is not known whether the drug is smuggled or being produced in local laboratories which is the fact that it is being used (Webmaster, 2021). Eligh substantiates the notion with the argument "In South Africa, as in the rest of the region, little is known about the market system supporting and facilitating the production, distribution and use of Meth" (2021:21). It may be the case therefore that collectively, the variations in these studies outline a critical indication that, the issue is no longer about the place of manufacture or people but a condition of existence with adverse consequences within the spaces of African communities, hence the personal interest to this research relates with Webmaster and Eligh observations and insists on a paradigm to cater for impacted parents of children using and/or have previously used it rather than the place.

4.3 Prevalence and Demographic Characteristics of Crystal Methamphetamine

In the new global economy, Meth uses disorders have become a central issue and researchers have consistently shown a rise in statistics within the young population in

Asia, Africa, and the West regions. Richardson (2019) asserts that there has been a considerable increase in consumption over the past ten years regardless of the prevalence and usage patterns of methamphetamine among young people in these areas. She further claims that about 500 metric tons of amphetamine stimulants were produced in 2015, and 24,7 million harmful users were recorded with the heaviest misuse (street Methamphetamine) appearing to occur in parts of Asia in nations including, Thailand, Cambodia, and the Philippines. Europe, Australia, and the United States have also been rated red zones. Teenagers can start using drugs in the early years of 12-14 or the late years of 15-17, which poses a serious risk to their physical and physiological development, according to a report published by the World Drug Survey Report (2018; Jordan and Anderson, 2017).

The report also says that this young group may see a peak in substance usage between the ages of 18 and 25. Similar findings have also been made in Zimbabwe in the past, where drug misuse typically begins in children between the ages of 13 and 15 when they go to basic secondary education (Madzvamutse, 2021:12). The accelerated rate may be related to the miserable and vile examples being found in African townships and communities. Olawole-Isaac, et al., (2018:79) submits “In Sub-Saharan Africa, a systematic review of 27 studies involving 143200 adolescents done in 2018 showed the prevalence of any substance used to be 41.6 per cent with alcohol being the most common (32 per cent) followed by tobacco products (23.5 per cent) and cannabis (15.9 per cent). Furthermore, alcohol, drugs, and other substances being harmfully used have been reviewed according to gender distribution in Zimbabwe. 41% in girls compared to boys 59% (UNICEF, 2023:3).

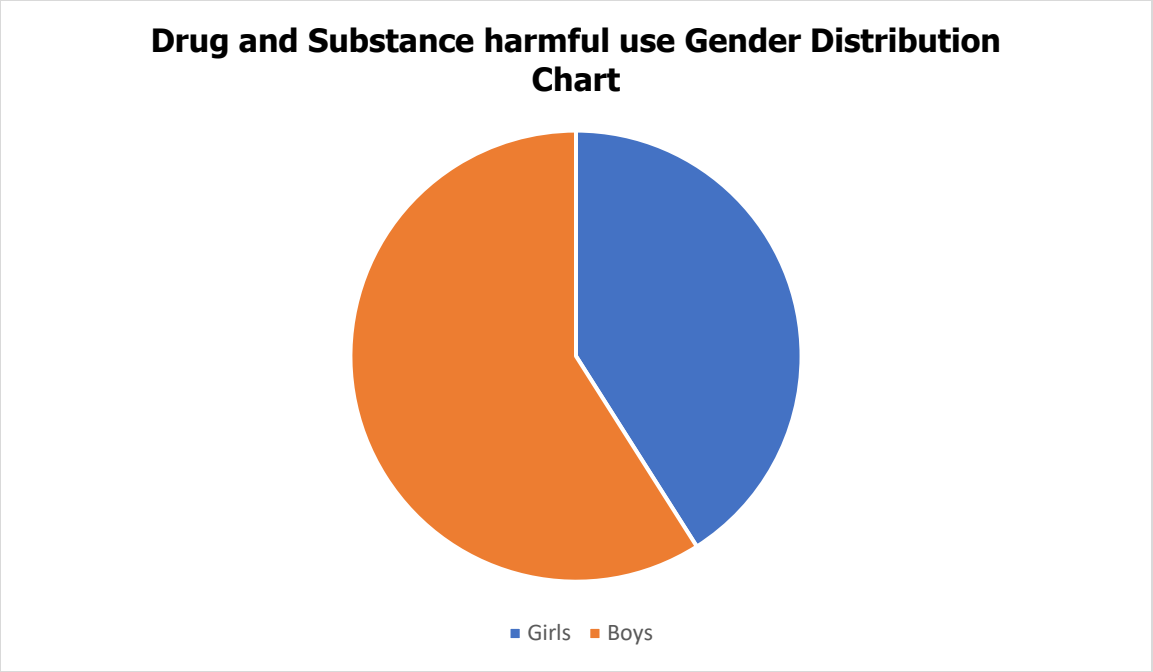

Figure 1.4 Gender distributions of drugs: UNICEF (September, 2023:4)

Although statistics have been provided on crystal meth users, no studies have been found that unveil a quantitative analysis of impacted parents. However, Olawole *et al.* (2018) statistics proved an important literary genre in portraying the essence of this research equating that the higher the population of young people misuse Methamphetamine the more the percentage of impacted parents according to Richardson (2019), the majority of crystal meth usage in the Southern African region has been reported in South Africa, particularly in Cape Town which is formerly recognised as the region's centre for Methamphetamine (locally known as tik) production and trafficking. Pluddermann, *et al.* (2010:14) conducted research that discovered "Meth" (tik) as the most and widely used drug among young individuals seeking substance misuse treatment." The research submitted hereby by Richardson (2019) and Pluddermann *et al.* (2010) can be abused in this research to prove the point that Methamphetamine has gained increasing popularity globally.

The UNODC World Drug Report (2022), claim that the Asia-Pacific area is responsible for 60 per cent of all Methamphetamine seizures worldwide. In Thailand, the National Statistics Office's 2017 study revealed that 4.8 per cent of young people between the ages of 15 and 24 reported taking Meth at least once in their lifetime. Furthermore,

research by the National Authority for Combating Drugs opines that 3.9% of young people in Cambodia between the ages of 15 and 24 also, reported taking meth at least once in their lifetime. In the Asian and African communities, a greater prevalence of reports of Methamphetamine usage can be registered and frequently attached to the 15-24 age brackets and these young people are still under the custody of their parents, hence the impact upon the parents remains a great cause of concern to this study.

The similarities between Africa and Asia's predicament with the Methamphetamine phenomenon are highly considered in this research as compared to the West. According to a NIDA (2022:103) study, almost 1.6 million Americans aged 12 and older had used Methamphetamine in the previous year, with the West and Midwest having the greatest rates of use. Methamphetamine use among young people has considerably increased in recent years, especially in rural and regional locations (Australia's NDARC, 2019). It can be deduced from the given statistics that there is much vulnerability to economies or contexts with less socio-economic progression such as Africa and greater parts of Asia vis-a-vis a few rural areas within developed worlds. As such, quantitative breakdowns in the aforementioned research have proven that the young population has been the recipients of harsh economic conditions and most users of Methamphetamine, hence resulting impact upon the majority of the parents of these children with substance use disorders remains a pastoral care challenge.

4.4 The Cycle of Addiction

Across all continents, communities and individuals are impacted by the global problem of Methamphetamine. To understand how cultural, societal, and economic factors affect the development of addiction challenges that influence parents of those seeking intervention, the debate on the cycle and addiction to Methamphetamine must be included in this study. Recently, NIDA pointed, "The cycle of addiction is defined by compulsive drug seeking and use despite unfavorable effects" (2022:104). The report further states that Methamphetamine addiction can be particularly difficult since it has a long-lasting impact on the brain's dopamine system, which affects memory, motor function, and decision-making. Understanding this pattern makes it easier to appreciate the serious effects that methamphetamine addiction has on people, especially parents.

African perspectives on Methamphetamine addiction show its terrible effects, and sociocultural elements like poverty, unemployment, and a lack of resources all contribute to the high prevalence of drug addiction. Drawing from extensive research by Dykers & Casker, “In South Africa, the prevalence of substance abuse is twice the global average, and the Western Cape (WC) is particularly disturbing with the highest prevalence of alcohol and drug use (2021:224-225)". In that drawback, a recently published paper asserts "Significant socioeconomic challenges experienced and the endemic poverty state in Zimbabwe, affecting 70 % of the population, has been identified as a risk factor for substance misuse cycle” (Marandure, *et al.,* 2022:4/15).

There is a consensus among Asian and Western schools of thought on the cycle of addiction. While Kim (2020), submits that addiction is a serious issue in several Asian countries that affects people from all socioeconomic levels and peer pressure, stress from school, and societal expectations are examples of cultural factors that may help start and perpetuate addiction, Charles (2020:103) from a western standpoint further argues, "Students now assume everyone takes drugs, and if you don’t take them, you are indeed part of the minority.” Interestingly, the Unicef analysis revealed that urban clients consume more drugs than in rural areas. The analysis cite that, “Alcohol, drugs, and other substances abuse is higher in urban areas than rural. The main reason is the stronger community childcare system and closer parental care that prevails in rural communities” (UNICEF, 2023:4).

The latter part of the Asian and Western thoughts can be critiqued citing that the author reflects the phenomena in a context with a seemingly stable economy hence cycle of addiction may be a result of peer experimentation or recreational use, as individuals seek the pleasurable effect of the substance. However, the perpetuation of addiction in Africa can be observed as a result indicated very high rates of unemployment, poverty and lack of recreational activities as can be seen by the formation of gangs, and the increased number of homeless people thereby associating the cycle related to socio-economic (see Pluddermann, *et al.,* 2010; Asante & Lentoor, 2017 and Marandure et al., 2022; Mukwenha, et al., 2021). Substantiating the argument as revealed in the 2020 world report , "Rising unemployment and lack of opportunities will make it more likely that poor

and disadvantaged people engage in harmful patterns of drug use, suffer drug use disorders" (ZIMFACT, 2022, 2/3). It is a strong possibility reiterates Marandure et al. (2022).

The cycle of addiction, in turn, has an impact on the parents of these individuals addicted to Methamphetamine. Reference is made by Mutsaka (2022) who during an interview with Smart Kora (not real name) 28years of age who used to sell fruits and vegetables on Harare streets opines *"I took to drugs and alcohol to numb the stress…and my parents took me as a madman and kicked me out of the house."* Premised by this predicament, one may share the same sentiments with Iranian thought which concludes "Substance users are likely to perform self-destructive behaviours…and harmful consequences directly goes back to the individual and indirectly affecting the family, friends and whole society" (Amani, *et al.,* 2018:44).

4.5 Crystal Methamphetamine Use Impact on the Economy

In the press release against transnational organized crime, Shaw writes "Organised crime perpetuates and profits from the world's major challenges and is a driver of unsustainable development" (2021:1/2). In the same vein, the dangres of meth trafficking are reiterated by a claim which state that, "Meth is quickly filling the deteriorating spaces of a growing number of marginalized and victimized communities that find themselves pushed to the margins of efforts to achieve socioeconomic development" (Eligh, 2021:3). Norquist & Spalding who asserts that submitted evidence linking Methamphetamine use and economy within the Western world, "At one time, meth was considered a drug that mainly appealed to low-income white men living in rural areas" (2012:5). Norquist & Spalding (2012) draws our attention to the distinctive category of meth users and place 'low-income white men' and 'rural' as often observed in the Western world. However, recent studies point out that the actuality of the perception is outdated and, to some extent, only serves to compound the ongoing lack of understanding of what has evolved into a thriving, globalized illicit drug industry and, more specifically, one that permeates the continent's blurred borders, interconnected economies, and vulnerable governance structures (Eligh, 2021:1). Given all that has been mentioned so far, one may concur with Norquist & Spalding whose studies are contextual and synchronize with this research, which

proposes that substance use, is not about a person, nor the place, about an incident, nor is it an event, it is a condition of suffering, anger, outrage, and a call for justice.

The majority of African states are experiencing a very depressed economic climate, and poverty levels in these states have been reported to be significant. These conditions have since exacerbated the use of Methamphetamine and pose a negative influence on many families' quality of life, with young people suffering the greatest losses. The economy is therefore supported by stressful and illegal border town activities, such as parallel forex trading, smuggling of goods, prostitution and selling of drugs and Methamphetamine being the top selling now. This idea is supported by Mukwena *et al.* (2022), who conclude that the combination of Zimbabwe's high unemployment rate, desperation, and poverty has led to an increase in the number of young people who turn to drug usage, including the use of Methamphetamine as a form of entertainment. Furthermore, research maintains that the dangers of meth increase costs to taxpayers of enforcing drug/meth laws, funding law enforcement raids of meth supply hubs, and shouldering the court and jail expenses of those caught up in the drug-related crimes (Norquist & Spalding, 2012:5). It is sufficient for one to point out that the majority of the economies are therefore being supported by stressful and illicit organized activities, such as parallel forex trading, smuggling of goods, prostitution and selling of drugs and meth being the top selling now (see Eligh, 2021:1).

4.6 Theological Inquiry on Harmful Use of Drugs Synopsis

Traditionally, the sacred texts have subscribed to the belief that believers ought to seek refuge in the Lord (Psalm 46). However, given the epidemic of substance use among young people in Africa, it is safe to argue that these young people are turning to substance misuse as a way to escape the stresses of daily life. Morgan argues "The fabric of many of our communities, prosperous and poor both, is being severely tested" (1998:34). Given all that has been mentioned so far, this study complements Morgan's submission that the time is ripe for the communities of faith to act, re-assert their traditional role in the great spiritual, moral, and community issues of our time. On one hand, Baba (2022:124) argues, "The silence of the bible on all drugs other than alcohol, primarily because most modern drugs were unknown or uncommon in the biblical era". Varghese (2019:7) on the

other hand contends "The bible condemns the phenomenon of alcohol intoxication but it endorses the use of alcohol for religious purposes and on social occasions". The main debate herein has been a neo-biblical repositioning of drug addiction and welfare that concentrates on the impacted parents.

In 1998, using contemporary practical theological method as a way to approach this phenomenon, Morgan integrates historical, biblical and other sources into a way of thinking about issues of chemical harmful use and dependency in a theological frame (Morgan: 1998:33). The author argued that communities of faith are challenged today to join the contemporary struggle against chemical harmful use and dependency in a new exciting way (Morgan, 1998:33). However, Varghese (2019:7) points out those theologians are of varying opinion about alcoholism and addiction. The past decade has seen rapid criticism of drug misuse, and Ross (2003:9) charges that, the "Hebrew Testament viewed drinking and drunkenness as synonymous and both with abhorrence-both Noah and Lot stories were good examples of immorality…" in religious realms. Genesis 9:20-27 tells the story of Noah's planting of his vineyard, drinking of its wine, and wandering around naked.

Lot's vulnerability to drug misuse was revealed in Genesis 19:31-35, and his two daughters took advantage of it by making him 'ticked' on wine and having sexual relations with him. The relevance of this research by Ross is critical to this study, in revealing the double side of consequences of Methamphetamine intake on both the parent and the child. Taking a cue of substantiating the notion from Billy Graham Christian Worker Handbook (2002:98) (cited in Baba, 2022:123), "Drug dependency is a problem of the whole person-spiritual, physical, emotional, and social life". However, Ross's analysis falls short of the scope of the study as she deals with the addition of a parent and the quest of this research is on the impact upon the parent because of the child consumption.

Furthermore, parenting which is not the core subject of research is compromised as shown in the text that Lot slept with his daughters. The analysis may opine another study related to incest because of drug and substance use. Incest has been a major cause of worry and a taboo within African communities and there has been observed a relationship

between Methamphetamine addiction and such condoned behaviours. The two striking lines from the periscopes- “Noah wandered naked”, and “Lot did not know when the daughters lay or when they rose”-might spark a controversy in theological discussions.

Considering these two descriptions for this study, the scope is thus limited to the impact of drugs upon parents with children using crystal or has previously used it in the past rather than the father's addiction as parents. As Morgan (1998:37) points out for the communities of faith to fulfil their proper role and meet the contemporary challenge of a unique contribution to the struggle with substance harmful use. Pastoral and theological dimensions must be reconstructed to recover an explicitly pastoral approach to cater for problems brought about by Methamphetamine's harmful use and particularly influencing the parents. In the same vein, Thesnaar (2011:25) argues for a theologically responsible pastoral hermeneutic, a pastoral interpretive guide within the local church that can contribute to assisting individuals, families and communities in dealing with this traumatic reality responsibly.

4.7 Preliminary Conclusion

This chapter focused on the exposition of the drug Methamphetamine and its historical traces. A reflection on other drugs has been looked at in this section and the study has opined that there are other drugs, and substances that are being used, such as cannabis or marijuana, broncleer and *nyaope*. The study in this chapter looked at the prevalence of the drug across the globe and unveiled the demographics within African states. It has been opined that Methamphetamine addiction within African states respects no age boundary and children as young as ten-year-old are vulnerable thereby exposing the plight of the parents as caregivers. The cycle of addiction is critical for this study to trace possible roots of vulnerability to succumbing to the drug. Elements relating to single-headed families and growing up in a drug-addicted family prove to increase the chances of addiction. However, modern trends have revealed that families who are in a well-to-do position have seen their children succumbing to drugs and an echo of regret from parents can be loudly heard citing the reason for over spoiling the child. The economy has also been impacted and the health services have not been spared. The next chapter will engage the findings from the interview narratives.

Chapter 5

INTERVIEWS

5.0 Introduction

The concept of Methamphetamine, the addiction cycle, and its effects on the economy were covered in the preceding chapter. It also, contextualized the reason of the study within the framework of Practical Theology. This position was supported by a clear trace back of the historical foundations of Methamphetamine. Thus, the study interviews are consequently presented in this chapter. Throughout the data gathering process, the in-depth interviews were continuously updated by adding follow-up questions. The participants' consent to take part in the study was obtained and listed in the appendix. The principal investigator outlined the strict adherence to secrecy and went over consent forms with the participants before getting their signatures. If there was any doubt about the question, participants were invited to ask for a clearer explanation. Participants were constantly reminded to answer based on their personal experiences, not those of their children.

The research provides a detailed report from each parent that was interviewed guided by the semi-structured questions. Even though the interviewee's English construction was incorrect, the research did not alter the phrasing since doing so would have negatively affected the interviewee's ability to do his work. Instead, it respected the depth of the lived experiences and the emotions of the participants. The following section shows the characteristics of the participants.

5.1 Participants Characteristics

The study involved four parents. One couple, consisting of both pastors, had previously experienced two different roles as pastoral carers to another family with a drug-addicted child and as parents raising a child with an addiction. The other family was the father, and 2 females, one a divorcee who is a grandmother and the other a widow.

A balance of the participant's background was considered, some parents and pastors belonging to main line churches and others. Of interest, was a Pentecostal couple (Parent

1) who had a double participation role, firstly being the affected parent, whose son was addicted, whilst secondly; they participated as pastors (Pastor 1). The ages of the participants ranged between 35 and 60years. Their education background made it easier to achieve the targeted results and sampling methods chosen were effective.

However, because of the intricate story with its many successions and the need to maintain the narrative's flow, it was challenging to follow the questions as it was structured with parent 3. The participant told the account of her experiences in a block, answering the other questions in the template. While the lead investigator was interviewing parent 3, one woman strolled over to see how she was coping up. Having observed the deteriorating well-being of parent 3, I subsequently learned that she started visiting her on a frequent basis. Throughout the interview, she discussed her thoughts and experiences with her late sisters' son who was an addict. The principal investigator granted her position as a resource co-participant as a result. Their individual experiences were captured even though the interview was conducted on a single voice thread. Participants were aged between 35 and 60, and the two families are married. Three pastors also participated in the interview from different backgrounds. Firstly, from a Pentecostal standpoint, there were the submissions made by a pastor couple. Secondly, an evangelical perspective and finally a protestant tradition viewpoint were gathered. In addition, the economic status of the parents was investigated, and results were obtained as in the table (See Table 5.1 below).

The following is the tabulated profile of the participants who are the parents of Methamphetamine addicts:

Demographics of Participants

Participants Characteristics		No.
Parents		5
Age Range	35-60	6
Gender	Female	4
	Male	2
Marital Status	Married	3
	Divorced	1
Employment Status	Gainfully employed	3
	Self employed	1
Relationship to Child	Biological Parents (Father/Mother)	3
	Other (Aunt/Brother/ Grandmother/etc.	1
Literacy Level	Research proposed criteria met	
Pastors	Female	1
	Male	3

Table 5.1. Demographics of Participants

From the table of participant's demographics, the principal researcher is now going to present and analyze the lived experiences that were captured during interviews.

5.2 Section 1: Interviews with Parents

The parents who participated in the study replied to question 1:

5.2.1 Share with me how you discovered that your child was using drugs?

The experiences and beliefs that parents had in response to this question are illustrated in the following quotes:

> *"It was after sometime when we discovered that our child was no longer involved in some certain groupings and some sort of activities in the family and at times, he would just close his bedroom and then just keep quiet like that. (Participant 1, Father, 20 December 2023)*
>
> *"Because we knew him as someone who was very quiet, someone who was just quiet you know but when he started taking drugs as the father was saying he used to talk sense, but sometimes when he communicated, he communicated things that were very strange sometimes." (Participant 1, Mother, 20 December 2023).*
>
> *"We used to go to church together, and suddenly he started boycotting or refused to go to church and started to do on and offs in terms of his church attendance… we saw that he was becoming a bit violent… now that he is a person who had grown a love for money too much to be having money in a short space of time, he could come asking for money give me money give money and the rate of asking was increased…" (Participant 2, Father, 18 December 2023)*
>
> *"The behavior had changed his going out and coming home had changed, if he goes, he will go and come back late evening. I have taught my children, whether boys or girls that at 6 O'clock everyone must be inside the gate at this house. That's when I started realizing that this child's walk and his behavior are no longer making me proud." (Participant 3, Mother, 15 November 2023)*

"It was through his wife, she came and notified that she was fade-up with the marriage, in a family grouping to help each other, he came and when he speaks, he was cutting words. After I asked what is going on he just changed and become violent, when I wanted to clap him, the taxi driver who drove him said brother don't do that he is high with drugs, where I took him was right on the place where drugs are sold, if you beat him, you might just kill him, I just sat down as he just drove away and we realize that he is deep down in drugs. On the second day, I gave him money to process documentation needed for the fleet of (six) 6 trucks we work with, he lied he was processing, and he took all the money and the papers and disappeared. The wife notified that he comes home and sleep for 3 days without working up, and he will be sweating as if he is running" (Participant 4, Father, 19 December, 2023)

Two participants out of the seven expressed that stress could be responsible for young people in Zimbabwe turning to substance use. Potential stressors that young people may face were described, including the death of a parent and psychological challenges after a divorce. Substance use was believed to be some form of coping mechanism for young people facing these stressors as expressed here:

"I had to ask them how they grew up with their parents and they were telling me that we grew up with our father and our mother died and then we were left with a stepmother he was, she was abusing so we ended up running away from home we came to Beitbridge to look for a job for work yes that's when they started staying here in Beitbridge." (Participant 1, Mother, 20 December 2023)

"Having separated with the father (emotional tears), the children were left at school … this my child is the second born, they are not here now, the boy was at Government doing grade six." (Participant 3, Mother, 15 November 2023).

Three participants, further argues the influence of peers as the cause to the addiction problem. It was started as an experiment.

> *"It was due to his toxic friends and his peers who introduced him to these particular things and I think one thing that might have led him to that is that you know, as children many times you follow, you join the wrong company and they start to do some experiments." (Participant 1, Father)*

> *"We the observed that the child is playing with other youths, but the youth he played with, were that kind whose behavior was not that well." (Participant 3)*

> *"Some friends watch the friends your kids are playing with, like on my son, I think the friends he was playing with. They are the ones that made fell into drugs, they are the major cause, I had to tell him not to play with these guys, but to him they were friends." (Participant 4)*

While the parents discussed their experiences in response to question1, two of the pastor's response revealed over-spoiling of children. This may be a factor that parents are reluctant to discuss as a contributing factor to child addiction. This is audible on the following feelings:

> *"The mother is working somewhere and the son maybe and because he is the last born, and parents spoil our children (last born)." (Pastor 3, Male, 8 February 2024)*

> *"Underlying challenges like a breakdown in the family structure, aah when life events that are challenging to them maybe failing at school, maybe not getting a job, or not or being spoiled so they do have other social problems and they then turn into drugs as a way of escaping to the challenges that that they have." (Pastor 1, male, 15 November 2023)*

> *"He was like an orphan, my brother, his father died in 2000 and the mother in 2009 and I took care of him." (Participant 4)*

The second question that the parents' participants responded was:

5.2.2 Can you describe to me how this discovery affected your relationship?

The parents' responses variations can be attested from the following negative and positive responses.

> *"I had to make sure he is incarcerated, having observed that he was becoming more violent, breaking by doors." (Participant 3, Mother).*

The above is a narration of the mother after some violence behavior done by the child. At first, she had asked the police to come and arrest him, but the police denied on the basis that there was no incriminating evidence to proceed with the arrest. At times she had to falsify fabricate a story, just for the child to be arrested, and the statement below supports the action.

> *"So, it really affected us a lot because you would end up maybe not in a good relationship with the other people his friends chasing them away." (Participant 1, Mother)*
>
> *"It really affected us too much… relationship with the child went bad, it never changed to better, but it was getting worse every day because he was now a person who could not listen completely." (Participant 2, Father)*
>
> *"Now I have to fabricate a story that he can be arrested, and I contacted the pastor to contact Mr. Mpofu to come with the police, for Malcom has broken my tenant's door." (Participant 3, Mother)*
>
> *"The most disturbing thing, I am affected a lot, we parted ways, even now though he has changed, but his trust has already gone and building that trust is taking time, and I don't know if I will cope up or not. I talked to my brothers that we had to, move him out of this town…, I discover that there was no-one who wanted to take him except me because I was the one who took him, and I was the blame" (Participant 4)*

Whilst parent 1 (being the mother had a negative experience on relationship as shown above, the husband revealed a total opposite notion and positively the parent had this to say.

> *"I thank God that this discovery did not detach me from my son. I became so loving, I understood that he was through a difficult time, and it was pivotal for me to be on his side." (Participant 1, Father).*

On question, 3 and 4 were combined and summarized as follows:

5.2.3 What are some of the difficulties you have to deal with in your everyday activities, and routines and share with me some negative responses you face, such as shame, stigma as a parent who is living or has previously live with a child who is battling Crystal Meth addiction?

Responding to this question, the participants' experiences highlighted varying responses, which are thematized as follows:

a) Sleep disturbances

Parents reported experiences of lack of sleep because of their child's use of drugs. Three of the participants narrated that they were not able to sleep scared of the bad things that might happen to their child following an attempted suicide:

> *"It was traumatizing especially when he wanted to commit suicide you know we could hardly sleep, we were always on guard, one sleeps one was awake to check what he was doing whenever we heard the door opening, and we were on guard to check where is he going?" (Partticipant 1, Father)*

He also commented on assumed preaching's which was done even at odd hours of sleep.

> *"I remember one night when we were sleeping it was around 3:00 in the morning he banged on the bedroom door opened up the bedroom door, and he was talking all sorts of things, until we realize that he was sort of*

preaching [he could preach-husband] he could preach so we thought maybe really this person was preaching, he could wake us up at any time and he said let's pray we need to pray because they are some things here…"

The other participant had this to say:

"As a parent, you are not free at all, when the child is outside you always think what is he doing now?" (Participant 2, Father)

In addition, third participant reported that:

"I don't lock my gate, as I used to, fearing that if my boy child has a problem and he will be chased he will just come inside without any problems because there are evening times which will be rated late night and you believe they will be playing and they come back home late..., I could not sleep fearing the harm that could be done to his wife and child." (Participant 3, Mother)

b) Hindrances to other commitments

The parents have a life as well, in terms of daily routines and these were disturbed. Three of the participants had to say:

"We came to a point that; how can you be an advisor to some people's children may be yours you can't even contain him?" (Participant 2, Father)

The parent was a youth advisor at local and national level, and his commitment was hindered as expressed above. Other parents had this to say;

"We were at the conference at that time so the aunt had to phone us and we went looking for him but you know, it was terrible "(Participant 1, Father)
"So, we were very much on guard 24/7 and sometimes, it was really hard for us even sometimes to go and leave him alone, it did disturb us a lot." (Participant 1, Mother)

Difficulties faced have a double effect on both works related and as well church related. Parent 4 reflections opined that:

"The company I work for is very busy, we have many trucks we clear in the border and he was my helping hand, my pillar, I was a church treasurer and I thought of quitting, my family time was hindered for I started drinking." (Participant 4)

c) Loss of property and finance

When they needed to use the same item, the parents began to notice that several valuables from the house were missing. Every parent said that they had survived their children stealing from them. They said that important family assets including generators, invertors, and other household goods including bulbs were also being taken from them in addition to money. This revealed to the parents that their children are stealing to satisfy their addiction craving. Parents experienced property loss and damage in different ways; one of the parents highlighted an issue of damage with aggression:

"I had to make sure he is incarcerated, having observed that he was becoming more violent, breaking by doors." (Participant 3, Mother)

The *other parent noted that:*

"It affected us, we started missing some things like we had some generators, we had invertors, we had wheel burrows new ones and we were asking who is doing that? We had not realized that he was, through his friends whom he sends to our home and steal from us." (Participant 1, Mother)

"We started missing things in the house; he started with taking small things that you cannot easily and quickly notice until the day you may need to use it then you realize it is missing (Participant 2, Father)

"I am running a crèche, and the parents' bought blankets, and he stole them through the window, and now I have to replace them. "(Participant 3, Mother)

"Because he was working in the border, he started stealing batteries from trucks just to sell them and buy crystal meth, and at one point he was apprehended, and I was called to witness him cuffed and I settled the matter." (Participant 4)

The financial loss was also experienced through theft and medical attention for both the parent and the child misusing the drug:

> *"This behaviour is unbecoming we had to take him to the hospital" (Participant 1, Father)*
> *"We had to get somebody whom we would pay, if we think of going out, we had to see that there is somebody who is with him. (Participant 1, Mother)*
> *"That he is a person who had grown the love for money too much to be having money in a short space of time, he could come asking for money give me money give money and the rate of asking was increased." (Participant 2, Father).*
> *"There was scarcity of money in the family, as it was being used for drugs, we replaced the clothes he had sold, and he kept stealing and reselling his child's, brothers', and his clothes until he could take anything "(Participant 3, Mother)*
> *"I gave him money to process a fleet of 6 trucks, he met the drivers and lied he was processing them, he just disappeared with the money and all the paper work. I had to ask my wife to compensate the loss." (Participant 4)*

d) Psycho-Emotional Experiences

Psycho-emotional pain was a result of frustrations, denial, or shock when they discovered drug use by their child. Parents express hurt by the child's drug use behavior about the care given:

> *"So, sometimes it was really hard, in the morning you ask, how are you feeling? He would just look at you and then he keeps quiet. There was some sort of mood swings, one time again he could be so friendly, and sometimes he would be saying I don't want that person I hate him for reasons unknown to answer. So, it was traumatizing to witness our child.*

Yeah, you take yourself then supposing if it was me in this position, how would I expect other people to treat me so, we sort of like driven in that compassion and that love that we must protect him." (Participant 1, Father)

"He could go for some days without eating without drinking and without bathing. Sometimes I had to take him for a bath and assist him in bathing, imagine with his age" (Participant 1, Father)

"I didn't know that it is like this, as I talk it seems as if it was easier (emotional tears) but the time when he returned back from South Africa, I physically got very sick and my weight reduced and could not even stand up where I was sitting even though I stay at the gate of the church" (Participant 3, Mother)

"I don't know how to say it, but the heart says it most. You start thinking, what did I do wrong? I took him in for the good reason and not for drugs. What did I do to God to deserve this? This is my blood struggling with addiction."

e) Socio-spiritual Experiences

Social impact experiences of parents with children using and who have previously used Methamphetamine emerged in different forms. Themes like stigma, shame and secrecy were the major in the reports given by the participants because of social impact.

e (i) Social Isolation and Stigma

It is a natural response of human beings to react by giving a distance from something undesirable. One participant noted;

"So, it really affected us a lot because you would aaha end up maybe not in a good relationship with the other people his friends chasing them away" (Participant 1, Mother)

Furthermore, another parent expressed that;

"It was so hurting to us to the extent that we nearly stopped going to church." (Participant 2, Father)

e (ii) Stigma

Having a child who is using drugs attracts stigma within the family, society and communities of faith and one parent shared the experiences and stated that;

"The withdrawal of family, and church, it's our story: it is like we are cursed we were excommunicated. We could even see when they do their groupings, we are even the discussion. There is a time they could speak about that, you could feel that no this time they are now hammering us the parents, for failure to raise your children when you see the children misbehaving the problem is the parents, parents are instrumental, you would find it was really…" (Participant 1, Male)

e (iii) Spiritual Stigma

Signals of spiritual stigma within the communities of faith were recorded from some of the participants and these were:

"It was really shocking and even in the church as what dad was saying that it affected, it was as if it was done purposely that us, we are sending that child of ours to go and be in that environment." (Participant 1, Mother)
"It wasn't a good journey at all because at the end of the day we were being stigmatized even at church, the preaching's were not good at all there was much blame on us parents as if we were instrumental, we never one day bought him" (Participant 1, Father)

f) Shame and Secrecy

Tendencies of internal and external shame emerged from the participant's response.

"Because elsewhere you go outside, they will be looking at you like you know there goes the parent of that drug addict… It's like they are blaming you for that, it's like you are the initiator of this particular" (Participant 1, Father)

"It affected us to the extent that may be aaha I am telling you; we were also working with the youth in the church. We came to a point that how can you be an advisor to some people's children whilst you can't even contain him?" (Participant 2, Father)

"Still, I can't face his mother-in-law, we go to the same church, and his wife has since stopped coming to church. There is this protection that you want to have, this secretive thing-this is family and you don't want to be open to anyone, sometimes you need to be secretive when things are bad." (Participant 4)

Additionally, the parent disclosed a tendency towards concealment and he said that:

"During the period when we knew he was on drugs, we probably took it like a family issue, we thought maybe we could just talk to our son and we finish maybe he will understand, and little did we know that he was already deep into it." (Participant 2, Father)

The parent openly expressed their external shame when he said:

"We tried to find friends that can help us the time you consult with them, that I have this problem with my child, friends whom you can seek help from, but they have spread the family secret to everyone and the worst part being wrongly interpreted, with exaggeration which will not be in good standing So, we thought we could deal with it secretly." (Participant 2, Father)

One pastor cited the difficulties of journeying with parents and their children as he narrates possible challenges posed by secrecy. He points out that:

"Yeah, thank you, in fact the challenge as a pastor and our pastoral care is that people are not opening up that's number one, you just only see

maybe the results after, instead of opening, I think the main challenge is that parents are protective to their kids they don't want to expose them and also, they only come out when violence had happened, or when someone is injured and so on." (Pastor, 3)

5.2.4 Question5: Have you sought any pastoral care support/counselling to assist you in overcoming the difficulties you are experiencing?

"I think much help came from books, we did a lot of research we were reading and we received solace and comfort through reading. In the church, no one was willing, people were just adamant they never even paid us a visit" (Participant, 1, father)

Two follow-up questions were raised following participant 1 response:

5.2.4.1 Can we say the church has knowledge/or program or anything to do with these issues?

"Yeah, they know that this crystal meth is being misused, but they lack the information to disseminate the information. And the next thing teachings are not going to happen even the awareness. It was only that awareness like that one when have a workshop were the extend was that we must pray for our youngsters who are into drugs. Just in passing, just in passing."

5.2.4.2 In terms of treating you the parent encouragement is found to help the young person like praying for them, what about for you as a parent?

"Aaha that type of help we did not receive, such help did not come our way…, no one is wants to be interested in you and I tell you that during that time we rarely received, we didn't receive any visitation from church members even from the leadership…The withdrawal of family, and church, it's our story, it is like we are cursed we were excommunicated."

The impact of the drug to the parents surviving in a community leaves the parents struggling with self-blame and this closes the need for counselling. The following sentiments revealed:

> *"I haven't sought for any pastoral help" (Participant 2, father)*

> *"I haven't sought for any pastoral or counselling in general, most families are still in deep trouble- counselling for a son who is into drug-1st thing you are blaming yourself what did I do wrong and you fear for being judged." (Participant 4)*

5.2.5 Question 6: What kind of guidance or assistance do you believe would be beneficial to the path to recovery for your child?

The participants' sentiments revealed that self-help, withdrawal, rehabilitation and counselling are the optimisms of grace towards the recovery path. In the following record, one parent opted for withdrawal:

> *"You will see that the church, yes, they now know about the situation but they have nothing to do. You end up giving up and saying, what can I do? -nothing." (Participant 3, Mother)*

The other parent had confidence in the medicals and self-help, and the following insert shed the light:

> *"I think the best path is the physical one being to receive medication to accommodate the child in the journey of recovery and also to love him".*

The participant further highlighted that self-therapy helped them to deal with the recover process:

> *"We must do what David did, we must encourage ourselves in the Lord and not to look for help elsewhere and that's what we did, we could speak life into one another. I could speak life to her she could speak life to me"*

"We just accept him as he is, he is our child, his part of our family, lets really take him through this process of recovery yeah that what we did we gave ourselves." (Participant 1, Father)

In addition, parent 1, the mother cited:

"I think, aah really, I would say prayer is the key, God hears when we cry… I saw a change in my child because of prayer and the love we used to give."

The other participant noted the importance of pastoral care and counselling as well as rehabilitation resources permitting.

"Maybe counselling from the pastor on the child. I think maybe something needs to be needed more, if it's only that things are not good now, I think to send the child to a rehabilitation center maybe for a period of three-six months it might help (Participant 2, Father)

5.2.6 Question 7: What role do you believe the spiritual or religious process might address a Crystal Methamphetamine addiction?

"*I think spiritual religion must try to gather them, maybe after counselling, I think if the church may have a place whereby if resources are found, then adopt some of these children, maybe give them spiritual lessons. The church must at the moment extent its resources to youths, give them more programs…" (Participant 2, Father)*

Preferring a gap in ministry of presence, parent 1 cited the history of another family with a child with a drug use-disorder who had converted to their church. The subsequent reaction served as an example of this:

"But I want to tell you, they were good at paying their tithes, very much active, but you find this neglect, this lack of visitation. Each time, it was just me and mama going to their place to pray for them but the church

leadership did not go, that is how we lost that couple. They are now in this white garment churches we lost that couple." (Participant 1, Father)

5.2.7 Question 8: What guidance would you offer to other parents who are experiencing a similar situation?

"Parents must always monitor or check on children, whom they are engaging themselves with, and have proper communication with our children maybe we might help understand their problem before they engage onto these things." (Participant 1, Mother).

"You have to communicate with better people who can understand you, who are ready to help and to engage you." (Participant 2, Father)

"I encourage the parents to relocate their child, since this locale remains the base of suppliers, peer friends, and this has worked for my uncle's son" (Participant 3, Co-participant)

"Do not give up, find help no matter the cost, and check one another for in a family they may be many people using drugs and you won't know." (Participant 4, Father)

5.3 Section 2: Interviews with Pastors

While the interviews were done, the recording device was affected with a virus, and the recordings with pastor 2 were lost before completion of the transcripts were done. Thanks to parent 2 who retrieved a backup audio, he was recording during the session. However, it recorded even the parts of counselling with the family and one of their children and as well, the volume was low. An apology to pastor 2 was given by the principal investigator as he observed the complication of the time availability versus the schedule of the pastor. The following are the questions that were posed to the pastors:

1. Can you share with me how Crystal Meth (Dombo) usage affects families during this time?

2. Have you heard of any parents that have overcome a drug (Meth) addiction and successfully recovered? Share with me, if you have experiences of the parents who have overcome this problem?

3. What method do you use in pastorally helping parents during this time?

4. What do you think are some of the most significant pastoral care problems affecting during this time?

5. In your opinion, what kind of pastoral care interventions helpful in assisting you during this time?

6. Analyzing the religious aspect of this journey, in what way did the church play it role in caring for you?

7. Looking at your journey and struggles during this time, what advices can you share to other parents who are experiencing this problem?

5.3.1 Question 1

The responses of all the three participant pastors on the first question were:

> *"It affects mainly aah the users, they get sticked/ticked, I witnessed hallucinations from the users were they just talk about things, at times they divulge family secrets, things that should not go on the public domain, so it then affects the family" (Pastor 1, Male, 15 November 2023)*

> *"This drug has become a burden especially in the family set up and you'll discover that many parents are in a dilemma. They are facing a number of challenges as this drug is normally affecting especially the teenagers. The problem being faced by the parents is violence. They are no longer respect their parents, they also steal property, whilst they steal the property they go and sell the property so that they can get money to buy*

mutoriro, crystal meth and so on and they are also a nuisance in the family. Also, in the community there is no peace." (Pastor 2, Male, 8 February 2024).

5.3.2 Question 2

The second question attracted the following responses:

"Aaha not currently not currently…aah because of maybe of our health delivery system in the country. We don't have institutions that are fully equipped to assist in breaking the addiction. I have noted parents who have kids who have gone in and out of jail because they are committed petty crimes and these petty crimes at the end of the day at magistrate courts and they are locked up. By the time they are locked up they stop using ok but the minute they leave, their serving their sentences say 2months, 3 months, 4, 5 ,6 sentences in jail, when they come back, they are back on it again" (Pastor 1, Male)

Pastor 3's response indicated a partial recovery for a shorter period:

"Yaa, the women are a little bit relieved after taking the… number after reporting him to the police."

5.3.3 Question 3

The sentiments on the third question revealed pastoral challenges to the affected parents due to the incapacitation of the pastoral resources at hand to journey with them.

"It is very difficult pastorally because, one you're saying be strong in the Lord, but you know that this parent is going through a difficult time… it is a challenge, at times you just go into… and listen to the parents. So, it's difficult and the other way of assisting these parents is directing them or referring them to other institutions that can assist them." (Pastor 1, Male)

"Prayer is the weapon; the bible says if you cry out the Lord hears." (Pastor 2, Female)

“Normally we use the Bible for counselling and also we do what we call referrals.” (Pastor 3, male)

There is a high record of young Zimbabweans who fall victim to drug misuse, leading to broken families, wasted lives, and premature deaths. Yet, despite the growing epidemic, the country’s anti-drug campaign remains focused on prevention, neglecting a crucial aspect of the problem rehabilitation (Mkwapatira, 2013).

5.3.4 Question 4

On the fourth question on pastoral care challenges, pastoral formation proved to be limited in its scope in terms of preparing pastoral practitioners serving communities affected by drug addictions. The following submissions were made:

“How to deal with it you are not equipped, social workers will do better because they are trained to do it but a pastoral counselling/counsellor practitioner might not be equipped to deal with drug addicts because they can become violent.” (Pastor 1 & Pastor 2)

“In fact, the challenge as a pastor and our pastoral care is that people, they are not opening up that’s number one. You just only see maybe the results after, instead of opening. I think the main challenge is that parents are protective to their kids. They don’t want to expose them and also, they only come out when violence had happened, someone is injured and so on.” (Pastor 3, Male)

5.3.5 Question 5

The above responses had an impact on the response to the next question on any pastoral interventions, which are helpful. Prayer has been rated the most, but the pastors had no intervention program at hand to assist them in the process. Pastor 3 opted for teachings as shown in this response:

“I think it to open class meetings, in that class it must involve all the youth so that you have to meet them almost maybe once or twice a week and giving them some tasks and also form some clubs.”

5.3.6 Question 6

The role of the church has been having been to a certain extent dormant citing several reasons like incapacitation on knowledge about the drug, budgets to deal with the phenomenon and its preparedness to emanating social issues. In light of this, the question of analyzing the religious aspect of this journey, revealing what way did the church had played its role in caring for the pastors had the following responses:

> *"As a corporate body of the church at times our responses to such issues are very slow, there is no support that comes from any head office. Yes, people might talk about drug misuse and engaging in awareness campaign, but when it comes to proper support for people who are experiencing it, I am thinking they are still lagging behind. We should be having interventions that are coming from training, reorientation for the minister to equip to be able to deal with such cases." (Pastor 1)*

> *"In our church we have what we call Christian and social responsibility, there are some funds for those mostly being affected through that committee, I can say although some resources are limited for that committee had to look after those people." (Pastor 3)*

"The church absolutely did nothing in our case, maybe, because we are pastors; we were meant to find our own means of dealing with our problem" (Pastor 1)

5.3.7 Question 7

The final question in retrospect solicited for some advice to other pastors and parents who are in this journey. Checking of social networks of the children, avoiding over spoiling children and seeking guidance has been the overall themes as stated below:

> *"Lookout for look out for whatever is happening with your children even at school, try to be involved even if they are not doing well find out what they can do so that you can guide them in a direction where they can find their self-worth because most of these young stars have got very low self-esteem." (Pastor 1)*

"Don't be secretive, find help to the right people who does not judge you, and be prayerful." Pastor 2)

"Drug has become an enemy for everyone; it includes the church, the government and the community. The gospel is the good news, drug is not good, so we have to preach this gospel wherever we are and fight against this problem it has become a pandemic especially to the youth so I would say to the parents this is what is happening the snake has entered our house so you don't have to run out to run away from the house so what is important is to kill the snake." (Pastor 3)

He went on further to give a plan of action to be considered:

1. *Monitor his influence*
2. *Make sure you don't give him extra money and*
3. *Make sure you take your son to counselling*
4. *Make sure you take your son every time to church*
5. *The most important thing is to pray, to pray with your children, to pray as a family*

5.4 Analysis of Shared Narratives

The findings are consistent with various authors that parents were found to have had a great effect on their children addiction to Methamphetamine. Anyone can become an affected parent at any time of his or her life but the intervention to the lived experiences period is perhaps the most critical time in a person's life. The data gathered support the claims made by a number of researchers those parents of children with Methamphetamine addiction had a significant influence on their daily life. At any point in life, anyone can become an affected parent, but the span of intervention leading up to these lived experiences is arguably the most critical. These results are consistent with the assertion made by Sarkar *et al.,* (2016:12) who states, "The family is affected by substance use disorders to a large extent in various ways". Therefore, it is important to recognize and value the role that parents play in the treatment of substance use disorders, since they offer a vital source of support. Thessner (2011) and the research both concur

that Ellen Pakkies' story is a true representation of a society trapped within the cycle of abuse and violence. Thessner further point out that the ramifications of this destructive cycle and legacy of the past in our nation make these real-life stories exceedingly complex, challenging to cope with and the path to healing is never easy (2011:34). Given the intricacy of the parents' tale, it is evident that, in order to address these intricate lived experiences, practical theology within clerical and ecclesiological paradigms needs special attention. Consequently, it is critical to have the ability to comprehend, interpret, and listen to others in order to support these vulnerable parents as they begin the process of healing.

5.5 Preliminary Conclusion

An analysis and transcription of the gathered data have been conducted. Parental and pastoral categories were used to classify it. Different categories arose, and those with a higher saturation value were the ones to be eliminated. A theory that expanded on the pre-existing ideas in this field of study was developed from them using a theoretical coding. The number of parents interviewed exceeded that of the pastors, as may be observed. Data show that when their children use Methamphetamine, parents suffer emotional, social, physical, and financial consequences. With the hope that the religious community will restore its integrity to shame based traits to deal with drug-related difficulties, most of the participants opted to take their children to hospitals and rehabilitation centers. It is also evident that pastors and communities of faith lack funds, and a clear healing technique strategy. The suggested healing approach will be examined in chapter six. To create own suggested therapeutic process, the lead investigator will make use of the information gathered from the literature and the interviews that were conducted.

CHAPTER 6

THE PROPOSED PASTORS CARE HEALING METHODOLOGY

6.0 Introduction

Upon journeying together with the participants during interviews, numerous traumatizing details and insights were noted, including intense rage and a sense of hopelessness. In the search for meaning and significance, this research is certain that there is a common theme of shame, suffering, guilt, and stigma that runs through the accounts of pastors and parents faced with Methamphetamine substance addiction. Parents explicitly mentioned trauma-related components, whilst others emotionally implied them. The further question this section wants to grapple with is: What is the unique approach and contribution of Practical Theology within a psycho-socially and emotionally challenged community? This chapter then focuses on offering a pastoral intervention strategy to heal situations of trauma. The proposed pastoral intervention is based on findings from the study concerning chapters two and five. The strategy is intended to be used by the church, particularly by pastors and caregivers entrusted with the ministry of caring for the wounded healers. The strategy of restoring the intrinsic value from the stories of shame, suffering secrecy and stigma should be used for resilience when faced with child drug addiction. This will ensure that the care for the parents living with drug addicts and related issues is responded to in the best way according to the ability of the church.

The chapter, therefore, fits into the aim of this research and will be undertaken to present a pastoral approach strategy that the church may use to respond to the care of the affected parents whose children use Methamphetamine. To build a therapeutic approach, the study will be using Wimberley's narrative and Gerkin’s prophetic shepherding models. Lessons from Mucherera’s Palaver method, which is firmly anchored in the practice of collective storytelling to the resolution of conflicts, will be employed. A paradigm for

handling presumed secrecy in reaction to the self-sensitive and harmful trauma of protecting family life will be developed because of the conversation.

6.2 Explanation of the Pastoral Care

The most basic level of pastoral care this research subscribes to is about the cure or care of souls impacted by lived experiences as noted in the introductory story of the Munemo family, who experienced loss because of meth addiction by their child. This section connects well with the previous chapter in that the theme of trauma availed by the participants informs the way in which different approaches of pastoral care can be used to create a healing model. The methodology will draw strength from the discourse revolving around the challenges faced by parents faced with child meth use addiction. The variable of socio-spiritual experiences will also be instrumental in informing the methodology. Factors such as stigma, shame, and secrecy, which are detrimental and causal to the negative experiences of the parents, are the mainstay of the healing methodology the research contemplates constructing. Based on the findings that the parents whose children are using and have previously used Methamphetamine show some other behavioral and attitude changes this research views the parent as a patient and as such agrees with Holst (cited by Zabeko, 2020:206) health crisis and life-threatening incidents have either a positive or a negative impact on the patients. Thus, the healing process that is being offered here is intended to assist individuals in reconsidering pastoral care, viewing it with greater appreciation, and considering the competencies required to deliver successful pastoral care in a variety of settings.

6.3 Healing Method

Growing up in Zimbabwe, serving as a pastoral caregiver in one of the most deprived areas and as an immigrant minister deployed in South Africa, is just a drop in the ocean in as far as African livelihood narratives are concerned. I came to see how urgently narratives as propounded by Wimberly could be used as a necessary conduit to life change within African spaces and mostly considered in this study affected parents. In neighborhoods wrecked by worklessness, corruption, women and children abuse, where gangs are prevalent, drugs have become the norm, families broke down and those living

there have one thing in common, they for the most part dependent on the state for their daily survival needs.

In the healing process, Wimberly's re-pillaging narrative notion places a strong emphasis on connections and community support. The concerned mothers of the murdered and missing children in Atlanta sought an audience of clergy and their churches. (Wimberly, 2017: x). This concept can help parents who are struggling because their children are addicted to Methamphetamine by establishing a network of people who are willing to provide resources, advice, and emotional support. The feeling is driven by the Atlanta mothers who felt that their losses would be taken seriously, and they will be accompanied in their grief and suffering. When the communities of faith take issues of drugs seriously, healing replaces judgmental instances. A safe space, which Mucherera (2009) refers to as Palaver, inspires conversations and help the affected parents remove their mask of shame and secrecy. Many of the affected and voiceless families can find healing from these timely and non-judgmental narratives.

By employing narratives, Wimberly is certain that he has created a paradigm that addresses people's social, emotional, spiritual, interpersonal, and family needs with stories. Through this, he is utilizing biblical narratives as a means of exploration by doing this.

- "How Jesus came to grips with the shame and humiliation, He faced in his own life and externally as brought by others. Furthermore, how we can imitate His manner of handling shame" (1999:25).
- How forum-ing as a collective narrative practice can help us to reconstruct our lives to live non-secretive based values in our reality and transforms the community "(2017:78).
- And "how the parables of Jesus can help us heal and reconstruct our lives to live non-shame-based values in our reality" (1999:25).

The research believed that Wimberly is showing us another way in which one can use scriptural narratives to pursue healing. This research will now move into Wimberly's first proposed model. In addition to the Gerkin shepherding model, which focuses on offering

spiritual and emotional support to those going through a crisis, parents can get individualized care and direction based on their unique requirements and difficulties. The shepherding model can give parents the tools they need to get through challenging circumstances and assist them in managing the emotional toll that their children's addiction has had on them. Parents can gain from a holistic approach to healing that takes care of their emotional, mental, physical, and financial difficulties by integrating these two approaches.

6.4 Wimberly Narrative Model

Wimberly narrative model as a healing approach to the affected parents whose children are current users or previous users is critical to stand in camaraderie with the affected as opined in this research. This model allows pastoral care to connect to life stories, and facilitate and create development through these life-threatening narratives Wimberly exploration of Jesus' narratives and his relationship with those deemed unworthy or unclean because of certain behaviors they exhibited are therapeutic to affected parents who are deemed social threats (1997:63). The model is relevant and contextual to address the scourges being faced by people today paving the way for a modus vivendi that allows an arrangement conducive for conflicting parties (Child versus parent) to coexist in peace. Thus, this is an ideal model for helping troubled souls preoccupied with challenging circumstances and in need of pastoral therapy in this post-modernity era. Journeying with the affected parents alone requires a set of skills.

6.4.1 Jesus and the World of Shame

Shame is a pervasive sense of worthlessness, being unlovable, and a feeling that there is a fundamental flaw in one’s being (Wimberly 1999:17). As in the instance of parents, whose children are addicted to Methamphetamine drug, this research thus recognizes that shame is a horrible condition of feeling as though you are not loved or cared for by others.

The intrinsic worth is undermined by shame, which also serves as a means of survival in our lives. Wimberly argues, "Shame is like a satanic force which tries to prevent us from moving constructively within our lives and seeks to draw us back into the shame-based world" (1999:36). Finding meaningful interactions with people, according to Wimberly is

the care since it may foster self-worth and self-nature. This, in his opinion, is how the spirit of God intervenes on our behalf to support us in coming to see ourselves as valuable and worthy individuals by both receiving and giving forgiveness from God. Despite the fact that Jesus was confronted with shame and stigmatization in his community, he escaped internalization of shame and humiliation by never taking it personally (Wimberly 1999:40). Jesus' expression at the cross, “Father, forgive them; for they know not what they do" (Luke 23:34) augments the resiliency of Jesus in the face of shame.

Furthermore, Wimberly views forum-ing as a means to create conversational spaces to enhance democratic participation. The benefits of the parents from conversational forums are in the form of communal wisdom about responding to trauma, which helps to heal persons and transform communities (2017:20). He further insists that there is rebuilding of their lives because of experiencing the care of being part of the village. He views that these conversational spaces must be thoroughly examined to carry out governing decisions. Critical to this notion, is the reflection of Newman's analysis, which emphasized the role of CBC in the community, which was to promote political change on behalf of Atlanta's low-income black citizens (1999:21). The fact that drug and substance trafficking within the border post exposes the governments in place as cited with upheaval in economies of scale, political changes fostered by conversational spaces may have an impact in transforming communities.

6.4.2 Gathering of the Village for Just Participation

The creation of the Concerned Black clergy was a result of a caring response by the Black clergy to the most affected mothers of Atlanta who felt that their stories of loss would be taken seriously, and they be accompanied in their grief, and suffering (Wimberly 2017: ix-x). The local wisdom says *mugoni wepwere ndiye asinayo* (one who claims to be a good parent does not have children). Community support and relationships are prioritized in the revealing idea. Therefore, creating a social network of individuals through clergy who are prepared to offer resources, counsel and emotional support within the society and communities of faith is vital. This idea can assist parents who are having difficulty due to their children's addiction to Methamphetamine. It is in light of this view that this research

considers the re-village of affected parents of children addicted to drugs, considers their predicament, and proposes their healing from Biblical narratives.

Wimberly believes that our reality is often thought of as being created or constructed primarily by the language, we use and by the stories, we hear. Wimberley argues that each person and community has an orientation to the reality that is deeply ingrained and that the "beliefs and convictions that inform people's behavior, attitudes, feeling and relationships are fairly well-formed" (1999:15). He maintained that these beliefs and convictions of people, which construe their reality, could be changed through storytelling. The research's view, on storytelling, can be used as a powerful tool to change negative perceptions that people might have of themselves. Allowing, a person to retell his or her story creates an opportunity for the person to see positive alternatives rather than shame-based personalities. Shame-based personality internalizes the negative images of one's group identity; such images undermine one's basic sense of well-being (Wimberly 1997:39).

6.5 Gerkin Shepherding Model

In addition to the Wimberly narrative model, the Gerkin shepherding model, which focuses on offering spiritual and emotional support to those going through a crisis, is equally important. In the face of internalized shame and rejection, Wimberly proposes self-differentiation the ability to be free from absorption in the expectations of others (1999:41). This is the ability not to make excuses for one's situation; rather it is accepting what it is without having to deceive oneself. Parents can, therefore, get individualized care and direction based on their unique requirements and difficulties. The shepherding model can give parents the tools they need to get through challenging circumstances and assist them in managing the emotional toll that their children's addiction has had on them. Parents can gain from a holistic approach to healing that takes care of their emotional, mental, physical, and financial difficulties by integrating these two approaches. Through the shepherding model, pastors have the responsibility to seriously consider our psychosocial issues; hence, they can make efforts to restore the dignity of the hopeless.

Gerkin model is biblically centered, and sound and is critical to an African pastoral caregiver practicing care to troubled parents whose children are using or have been

previously using Methamphetamine as discussed in this thesis. The model of shepherding has revealed that care for the people of God involves care that confronts issues of justice and moral integrity (Gerkin 1997:25). Shepherding reaches out to hopeless and tormented souls in the trenches of shame and stigma, where death hasn't actually occurred but the underlying conditions are severe and harsh to survive.

The model confronts troubles perpetrated by the excessive influx and use of Methamphetamine as well as death-related violence and abuse of the right to life. These have culminated in emotional stress, sleepless nights, and insecurity among the affected parents. The causal factors paving the way to troubled souls do not spare families and communities. Nicolaides (2005), who postulates that, "The shepherding model by Gerkin is helpful because it provides an integrated approach to healing that is enculturated in the African belief system and culture, such as *"Ubuntu."* One of the elements that the paper has been reflecting on centers on the plight of parents who are trapped in shame stigmatized, and traumatic circumstances here defined as a state of a troubled soul.

Shepherding reaches out to despairing and tormented individuals in the prison of death, where survival is difficult due to severe and harsh underlying conditions rather than real death. The approach addresses issues caused by methamphetamine overuse and inflow thereby affecting parents of the addicts. Gerkin states, "Shepherding is done even in the valley of the shadow of death" (1997:27). This is translated not to imply real death but shadows can be interpreted as trauma that led to a dearth of existential meaning to the affected parents. The affected parents are now experiencing emotional stress, insecurity and physical challenges. Nicolaides (2005) postulates that the shepherding model by Gerkin is helpful because it provides an integrated approach to healing embedded in the African belief of Ubuntu.

6.5.1 Pastor as Shepherd

The pastor as the shepherd of Christ's flock imitates Christ as the main shepherd. The pastor also acts as a shepherd to the affected parents. To care for the parents during their pain of experiencing child drug addiction Gerkin, when using the metaphor of the shepherd, notes. In more recent times, the shepherd metaphor has been widely appropriated as a grounded metaphor for a caregiving pastor. The image of a shepherd,

in John 10:14, depicts God as the shepherd who knows his sheep, a normative portrait of the pastor of God's people" (1997:80). According to Lartey (cited by Zabeko 2020:220), a pastoral caregiver needs skills in both comforting and challenging people to encourage growth. The expression by one of the parents who states:

> *"For you to physically reprimand the child, it becomes difficult since he is now a young man and passed the age of being beaten. You will say that, yes, the church now knows about the situation, but they have nothing to do (sobbing tears), you end up giving up and saying, what can I do? Nothing".*

The above finding is an expression of "...hope lost… or internalized guilty…," reveals that the parents of Methamphetamine addicts conclude to regard themselves as failures who have already lost the game before the last whistle is blown. It also reveals that the church has no mutual solution to Methamphetamine addicts let alone their parents. This indicates the magnitude of the problem hence the need for hope on the hopeless by the shepherd. As described by the role of the pastor as a shepherd, the restoration of trust and the creation of safe spaces for interaction within religious communities are of utmost importance. As a shepherd, the pastor's primary responsibility will be to provide the parents with individualized spiritual and emotional assistance based on their unique needs and difficulties. Thus, parents can receive personalized guidance and care that is tailored to their specific needs and challenges. Susanna Wesley's unique one-on-one model of parenting, as mentioned below, provides insight into how this position might be applied further.

6.5.2 Pastor as a Prophet

The church has always been and will continue to be prophetic. This idea is supported by Gerkin, who states "God's care has from time to time been expressed in prophetic action leadership and confrontation with implication of the will and purpose of God forthright mutual care of human affairs" (1997:24). Three groups of leaders: Priests, Prophets, and the Wise Guides, provided pastoral care for the ancient Israelites (1997:23). While the priest's role centered on leading worship and ceremonial life, the focus in this section is on the leadership that is rendered by the prophets. According to Gerkin, the prophets

spoke for God when they gave moral guidance and chastised the community for adopting ungodly communal lifestyles that distort God's image. The biblical image of the prophets as God's servants is critical for healing the affected parents as they become aware that God still cares for them. They reminded the people of Israel of God's word and God's will. As a prophet, the pastor would seek to nurture the spirituality of the parents of the drug addicts during their pain and hopelessness. By considering the pastor as a prophet, Gerkin upholds the church's mission to give hope to the despondent. The prophetic pastor would use the power of God's word to challenge the family's development in love and faith while also trying to console them.

6.6 Complementary Aspects of the Wimberly and Gerkin Models in Addressing Pastoral Challenges within African Spaces

Using empathy, active listening and storytelling to foster healing and development is how Wimberly and Gerkin describe the Mucherera Palaver concept. According to Mucherera (cited in Zabeko 2020:209), most African and other indigenous communities believe that the roots of an individual's identity are rooted in the community to which one belongs, thus the common saying, "I am because we are since we are, therefore, I am". Individuals see him or her in light of the community to which they belong to their communal relationship. The saying, "It takes a village to raise a child," also points to the involvement of the community in giving individuals an identity. No human can survive on an island without relationships". To help parents with this process, pastors can encourage them to think back on their own experiences, work through their emotions and develop an understanding of how their relationships with their children are impacted by past or prevailing events.

Pastoral caregivers can help parents identify and confront negative attitudes, internalized shame, or patterns of behavior such as understanding and concealment between parent-to-parent and parent-to-pastors. A response during the interview opined:

> *"Still, I can't face his mother-in-law, we go to the same church, and his wife has since stopped coming to church. There is this protection that you want to have, this secretive thing is family and you don't want to be open to anyone, sometimes you need to be secretive when things are bad."*

In light of this, pastors may employ the Palaver concept in dealing with drug and substance misuse within communities of faith, catechism class may be of relevance in assisting the people to strengthen their bonds with their families and the other congregants. This improves communication with their children and helps them open up when they are traumatized, creating healthier coping methods. By establishing a safe space and caring atmosphere where parents may have meaningful conversations, and develop self-awareness and understanding, will allow them to eventually strive towards their own healing and personal resiliency and development.

Contextually, this study recognizes that Wimberly's narrative and Gerkin's shepherding models can be extremely helpful to parents in African environments and battling drug addiction in their children. The value of storytelling in pastoral care is centered on how well it facilitates the sharing of issues and experiences. Advanced technology and social media are hallmarks of postmodernity, which negatively influences family time and encourages the use of private social networks for problem solving. Kadenge reiterates that the busy schedules of most of our leaders leave them with little time with their children (Kadenge 2018:19). While bringing up children is not a stroll in the park and it affects the parents, it is clear that Susanna Wesley, A Methodist proposes a healing methodology as she states:

> *"I am a woman, but I am also the mistress of a large family. Though the superior charge of the souls contained in it lies upon you, yet in your long absence I cannot but look upon every soul you leave under my charge as a talent committed to me under a trust. I am not a man or a minister, yet as a mother and a mistress, I felt I ought to do more than I had yet done. I resolved to begin with my children; in whom I observe the following method: I take such a proportion of time as I can spare every night to discourse with each child apart. On Monday I talk with Molly, on Tuesday with Hetty, Wednesday with Nancy, Thursday with Jacky, Friday with Patty, Saturday with Charles"* (Swen, 2016).

Psychological stresses and self-blame experienced by parents as a result of their children's addiction to Methamphetamine have traces of commission. The previous

chapter on interviews revealed that, in a bid to express love, parents over-spoil their children and the children diverted the benefit of resorting to drugs. Kadenge argues, “Those who come from rich families may be spoilt by having plenty, while those who come from poor families are deprived and suffer from lack of everything". These two extremes may not be the best conditions for bringing up children." Susanna emphasized equal food allocation sufficient for every child's requirement, and this helps to defeat the challenge of over-spoiling. Story therapy allows parents to explore their thoughts, identify coping mechanisms and find hope for healing.

Alternatively, the Gerkin prophetic role emphasizes the responsibility of the pastor to tend and guide the sheep in the face of lived experiences. Pastors can have a prophetic role in the context of the effects of Methamphetamine addiction by speaking out against the institutional problems and social iniquities that fuel drug trafficking and destructive damage in African communities.

Ultimately, pastors may offer comprehensive and culturally sensitive care for parents afflicted by their children's addiction in communities by integrating the strengths of the Wimberly narrative model, Gerkin's prophetic position, and the Palaver modelled by Mucherera. Pastors can assist parents on their path to rehabilitation and healing by using advocacy, storytelling, and community engagement.

6.7 Preliminary Conclusion

The healing approaches that were explored for Gerkin's prophetic and Wimberly storytelling all stressed the importance of community involvement, discourse, and narrative. They are critical in resolving the difficulties that parents and pastors face. Gerkin's prophetic model emphasizes the role of the pastor as a counsellor and a shepherd who confronts institutional justice, which affects parents' lived experiences. while on the other hand, the Wimberly storytelling model emphasizes the importance of human narratives in healing. African traditions form the foundation of the Palaver system, which places a strong emphasis on re-village to conversate, reach consensus and foster just participation of the community towards social challenges being faced.

These models are useful in different ways to address pastoral issues in African contexts. The importance of storytelling in pastoral care was highlighted by the Wimberly narrative model as can be seen in the formation of the CBC in Atlanta, which took the plight of the narratives of the mothers who were missing their children seriously. Hence, the chapter elucidated that storytelling enables anyone, including parents of the addicts, to share their stories and find healing. Using lived experiences, pastors guide and care for their communities of faith by applying the Gerkin prophetic-shepherding model.

In the context of Beitbridge and African settings, the Mucherera Palaver system augmented these two models to improve community engagement and participation in social justice issues especially drug and substance trafficking and harmful use. The chapter discussed that pastors may develop a more inclusive and community-focused strategy for resolving pastoral care challenges related to drug and substance harmful use. In light of the healing methodologies, chapter seven makes findings and recommendations.

CHAPTER 7

FINDINGS, RECOMMENDATION AND CONCLUSION

7.0 Introduction

This section discusses the study's findings and how they relate to earlier research findings. Parent's physical, psychological, and social experiences are covered after their socio-demographic traits. The conclusion and recommendations are given at the end. Possible areas for further research are also proposed.

7.1 Findings

The participants reported that substance use in young people takes a long time to observe and this is caused by both individual and environmental trends and factors. The individual factors highlighted by participants included self-withdrawal from family gatherings, absence of the child in church activities and environmental factors included community factors, peer-related, spiritual and family-related causes.

7.1.1 Individual Factors

Three participants identified that their children were well disciplined in their upbringing, which also led the parents to concentrate on their work commitments without much observance of the child's changing behavioral patterns. Lack of family group participation, individual isolation from other family members and going to church, mood swings, frequency of asking for a minimal amount of money, violence, and stealing household goods were noted as some factors contributing to the awareness that the child was using drugs. It is evidenced from the participant's responses, that it took a long for most of them to notice these behaviors. Participants thought there was still a consistency of good behavior on the side of their children until their late pulses convinced them that something was not right. The fact that the child was a church-going child, and to the other participant, a pastor's kid 'PK', drug use was the worst expected case scenario. Even the pastors' recommendations highlighted the issue of the parents closely monitoring and observing early signs of behavioral changes in their children.

It was believed some parents had to focus on daily work routines whilst the young people were mischievous in experimenting with substance use. Participants expressed that it took longer for them to observe that the child was using substances because the child would simply dodge family gatherings. At times, the child could remain quiet in his room as if was busy and required no disturbance. Lastly, long absence hours as the child simply spends more time outside the house, tracing drug addiction traits was prolonged. Children's fictitious headaches obscured the highs of addiction. Upon questioning, they ascribed the pain to the border town's extreme heatwaves. This diminished the parents' perceived substance misuse thought existed.

7.1.2 Social Experiences Faced by Parents of Children with Drug Addiction Disorder

Caring for children who suffer from substance use disorders is a critical role for carers and the society. Parents seek to provide support, but they frequently encounter insurmountable challenges like social isolation and stigma. According to Wimberly, Internalized shame-based personality undermines a person's fundamental sense of well-being by initializing negative perceptions about their group identification (1999:39). The parents spoke about how unjust it seemed to other churchgoers/congregants to treat them based only on their children's behavior and how they felt judged and rejected by their communities. These outcomes have resulted in them producing a secretive mode of response and are now hesitant to confine their predicament within the church walls. Furthermore, the individuals perceived that the religious community viewed them as though they were condoning their children's behavior, even though they were facing significant challenges themselves.

The findings have revealed that parents' undesirable experiences were brought on by their children's unexpected behavior despite their upbringing, parents support and parents' status. Since then, highlights of added trauma have been registered because of the communities of faith critical and judgmental evaluation of parents' failure based on their children behavior. A gap in the effective pastoral care provided to the affected parents was believed to be caused by the clergy's lack of in-depth knowledge of the drug Methamphetamine. The outcome has demonstrated the lack of a suitable simulated

pastoral intervention strategy. The suggested healing approach, however, can be a helpful route of recovery and resiliency to the affected parents while it can empower the clergy to effectively journey with the affected and vulnerable parents. The findings also revealed that, parenting a child with meth addiction disorder is extremely challenging when surviving within church walls, especially to those occupying leadership roles. One is faced with self-blame and shame resulting in closing spaces of confinements and promoting secretive tendencies though damaging to the ultimate wellbeing. Community leaders and policy makers are faced with option to just interpretive participation, which becomes a guide in transforming individuals, families and communities.

7.2 Summary of findings

- Parents as caregivers are directly affected by their children's Methamphetamine addiction.
- Parents may unconsciously contribute to their children's addiction through over-spoiling.
- Ministers do not seem to be adequately knowledgeable about the Methamphetamine and the treatment of Methamphetamine addicts' parents.
- Secrecy is a result of perceived judgement and shame is both internalised or externalised
- The combined healing methodology of Wimberly and Gerkin is a necessary tool to journey with the parents in the face of challenges faced by Methamphetamine addiction.
- The concept of gathering of the village as demonstrated by the Palaver still upholds value in as far as Ubuntu is considered in African spaces.
- The factors that make people unsympathetic is that society is so polarised to the extent that if anything happens to those who are perceived to be rich, powerful families, because of other status, kindness to them is out of the question.
- Churches have meagre budgets and programs to adequately cope with the drug and substance scourge.

7.3 Recommendations

The implementation of the following protocols can be recommended as a means to enable pastors to provide sufficient pastoral care to parents whose children suffer from Methamphetamine addiction.

7.3.1 Training and Education

During ministerial formation, the seminaries must prioritize educating and teaching pastoral carers about the drugs that are threatening society. In addition, the concepts and methods put forth by Gerkin's shepherding and Wimberly's storytelling can be combined with the traditional Palaver that is proposed by Mucherera and has been widely in use within African settings. This will provide pastoral carers with the tools they need to successfully apply these methods to their day-to-day caregiving practices.

7.3.2 Create Safe Spaces

Real safe and inviting spaces where people may share their stories and lived experiences without fear of being judged and shamed for the behavior of their children are what communities of faith, through their pastors, must create. By promoting candid communication and attentive listening, pastors may establish a nurturing atmosphere for individuals in need of pastoral support.

7.3.3 Foster Community Engagement

Utilizing storytelling through the Palaver system's tenets involves the community in the pastoral care process. Village of society members to justly participate in the decision-making process related to drug and substance harmful use prevention, as well as enhance support systems through social networking that fosters cooperation and solidarity. Ubuntu will continue to have true significance and purpose in townships, and parents will be able to restore their intrinsic worth in the eyes of their communities. In the same vein, encouragement of community involvement to support men in coping can help overcome the myth that 'men do not cry' which causes many male parents to withdraw from their parental role and become depressed. "When fellow man is facing challenges, it is time for all of us to rally behind them, the assumption that all is well all the times when bringing up our children is not true" (Kadenge 2018:20).

7.3.4 Provide Resources

The study's findings make it abundantly evident that the majority of the churches lack a kind of ministry or program designed to combat drug and substance harmful use. Those churches with a program take an indirect approach to addressing addiction issues and promoting the well-being of addicts' parents. Likewise, the research revealed that communities of faith efforts to assist drug addicts and their parents were impeded by the lack of funding allocated for this purpose, even though a relatively small proportion of these parents are able to recover in their facilities. Few churches advocate for policies related to the fight against drug and substance misuse. Even while campaigns are undertaken, they only address the surface of the problems around the phenomenon rather than delving deeper.

While campaigns are done repeatedly targeting addicts, providing tools to assist parents facing pastoral challenges, including counselling, support groups and instructional materials may offer a practical solution to the plight of the affected parents. Communities of faith must reserve budgets intended to address drug and substance harmful use, particularly given the premise that the phenomenon is always evolving, and new substances are being used, such as diaper smoking and the ingestion of fermented cerevita porridge mixed with mazoe orange crush. Both parents and pastors may navigate challenging circumstances and gain the support they require to deal well with the aid of the funds and resources.

7.3.5 Build Support Networks

To provide pastoral caregivers working with this demographic the resources and support they need, churches must set up support networks. To assist caregivers in overcoming any obstacles they may encounter in their pastoral care models, promote peer support, mentoring programs, and frequent training sessions. It would be beneficial to collaborate with drug and substance rehabilitation and treatment facilities.

Pastoral care can effectively provide comprehensive and culturally sensitive care to parents facing pastoral challenges in African settings by adhering to these principles and implementing them into practice through narrative and shepherding approaches. This strategy can encourage the healing and development of the community while fostering a

welcoming and supportive atmosphere for individuals and families in need of pastoral care.

7.4 Further Research

In light of the study's limitation, it would be wise to conduct more focus groups and congregations from a wider range of denominations in future research projects that are comparable to this one. Additional investigation is necessary on:

- A hermeneutical approach is a transformative process for drug dealers to restore the image of God.
- Children with drug and substance use disorders violate their parents' rights. Protecting parents against such hazards is necessary. Subsequent studies must take into account a model intended to cater to the concerns of parents raising children who are addicted to illegal drugs.

7.5 Conclusion

This study aimed to create a model for journeying together for meaning and significance with parents and pastors in dealing more effectively with the challenge of Methamphetamine addiction. To do so, the research covered the accounts of parents battling their children's addiction, and these are a true representation of a society caught in the destructive cycle of drugs and substance usage. The objectives were to explore the lived experiences of the affected parents. In addition, discovering how they function when confronted with the challenge of methamphetamine addiction.

It is evident from the research that children's Methamphetamine addiction is detrimental to the parents' well-being. The existing experiences included physical, emotional and social problems affecting the parents and these affect the day-to-day routines of the parents. The study's conclusion significantly advances our knowledge of the trying and complex situations faced by parents of Methamphetamine-addicted children in low-income environments where unemployment is rampant. Accordingly, the challenges that are present in the setting of this study as shown by the impact of Methamphetamine upon parents as a pastoral care challenge, allowed this research feasibility to base the study on the premise that substance use, is not about a person, about the place, about an

incident, nor is it an event, but rather that it is a condition of suffering, shame, outrage, and a call for just participation to pastoral interventions.

Two important themes in parents' lived experiences as caregivers were secrecy and self-blame. It also shows how parents are emotionally impacted by their children's Methamphetamine addiction. In addition, every participant mentioned that among the main problems faced by parents of Methamphetamine-addicted children are financial strain, and disturbances in family and community unit. One cannot overstate how critical it is to recognize and address the psychological welfare of these parents who have been impacted by their children’s exposure to Methamphetamine harmful use.

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APPENDICES

This study has four appendices. The first appendix labelled Appendix A, is concerned with the sample of questions that were addressed to the parents while interviewing them. The second appendix labelled Appendix B, is concerned with a sample of questions used in the interviews while the researcher will be interviewing the pastors. The third appendix labelled Appendix C was concerned with the consent form, the fourth appendix-D is concerning research proposal approval and finally the fifth appendix shows the supervisors' approval. This was an analysis of both Appendix A and Appendix B.

Appendix A-Questions to Parents

1. Share with me how you discover that your child was using drugs?
2. Can you describe to me how this discovery affected your relationship?
3. What are some of the difficulties you have to deal with in your everyday activities, and routines as a parent who is living or has previously live with a child who is battling Crystal Meth addiction?
4. Can you share with me about negative responses you face, for example stigma, shame, etc.?
5. Have you sought any pastoral care support/counselling to assist you in overcoming the difficulties you are experiencing?
6. What kind of guidance or assistance do you believe would be beneficial to the path to recovery for your child?
7. What role do you believe the spiritual or religious process might address a crystal methamphetamine addiction?
8. What guidance would you offer to other parents who are experiencing a similar situation?

Appendix B-Questions to Pastors

1. Can you share with me how Crystal Meth (Dombo) usage affects families during this time?

2. Have you heard of any parents that have overcome a drug (crystal meth) addiction and successfully recovered? Share with me, if you have experiences of the parents who have overcome this problem?

3. What method do you use in pastorally helping parents during this time?

4. What do you think are some of the most significant pastoral care problems affecting during this time?

5. In your opinion, what kind of pastoral care interventions helpful in assisting you during this time?

6. Analyzing the religious aspect of this journey, in what way did the church play it role in caring for you?

7. Looking at your journey and struggles during this time, what advice can you share to other parents who are experiencing this problem

Appendix C-Consent

UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

LETTER OF INTRODUCTION AND INFORMED CONSENT
FOR PARTICIPATION IN ACADEMIC RESEARCH

Title of the Study:

The Impact of Crystal Methamphetamine upon Parents: A Pastoral Care Challenge

Researcher:

Denford Makwetse

2903 Dulibadzimu, Beit-bridge

Contact No. (+263) 719 638 706

Email dmakwetse80@gmail.com

You are cordially invited to participate in an academic research study due to your experience and knowledge in the research area, namely Beit-bridge. Each participant must receive, read, understand and sign this document before the start of the study.

Purpose of the study: The purpose of the study is to investigate and comprehend the negative experiences faced by parents whose children are currently using or have previously used Crystal Methamphetamine. The study also seeks to identify practical pastoral care interventions that can be used to help stimulate resiliency and recovery for these parents. The results of the study may be published in an academic journal. You will be provided with a summary of our findings on request. No participant's names will be used in the final publication.

Duration of the study: The study will be conducted over a period of 1 year and its projected date of completion is April 2024.

Research procedures: The study is based on qualitative research. Research papers and articles on the topic of crystal methamphetamine will be used and its impact on parents. In-depth interviews with parents who have experienced the impact of crystal methamphetamine use in their families and pastoral caregivers who have previously or are currently offering pastoral interventions will be done. To cater for all various educational levels, some of the interviews will be conducted in vernacular (Shona) and transcribed in English with accuracy.

What is expected of you: The parents are expected to share their lived experiences and the impact of Crystal Methamphetamine upon their lives and reveal any coping mechanism in place in order to address their challenge. On the other hand, pastors are expected to unveil intervention models they have used or are using in order to provide care to these affected parents and the role of the church in offering support to the affected parents.

Your rights: Your participation in this study is very important. You may, however, choose not to participate and you may stop participating at any time without stating any reasons. The resignation will be respected, and there will be no any negative consequences. You, as participant, may contact the researcher at any time in order to get any clarification on any issues pertaining to this research. The respondent as well as the researcher must each keep a copy of this signed document. There is no remuneration (payment) attached to participation (you may not demand compensation for taking part in the study)

Confidentiality: All information will be treated as confidential since this matter is a sensitive and of a personal nature. Pseudo names will be employed throughout the research in order to protect participants and institutions. Raw data will be confined to the researcher, the participants and the researching institution only for the purposes of this study.

The relevant data will be destroyed, should you choose to withdraw.

Remuneration: No money / fees gifts or any form of reward will be awarded / offered / can be expected by co researchers / respondents / participants at any time during the research

WRITTEN INFORMED CONSENT

I hereby confirm that I have been informed about the nature of this research.
I understand that I may, at any stage, without prejudice, withdraw my consent and participation in the research. I have had sufficient opportunity to ask questions.

Respondent: _____

Researcher: _____

Date: _____

Contact number of the Researcher: _____

VERBAL INFORMED CONSENT (Only applicable if respondent cannot write)

I, the researcher, have read and have explained fully to the respondent, named

_____ and his/her relatives, the letter of introduction. The respondent indicated that he/she understands that he/she will be free to withdraw at any time.

Respondent: _____

Researcher: _____

Witness: _____

Date: _____

Appendix D- Research Proposal Approval

Faculty of Theology and Religion

Research Office
Mrs Daleen Kotzé

21 September 2023

NAME:	Mr D Makwetse
STUDENT NUMBER:	21473057
COURSE:	Masters
DATE:	21 September 2023
APPLICATION NUMBER:	T038/23

This letter serves as confirmation that the research proposal of this student was evaluated by:

1) **The Research committee**: This applies to all research proposals
2) **The Research Ethics committee**: This applies only to research that includes people as sources of information

You are hereby notified that your research proposal (including ethical clearance where it is applicable) is approved.

Prof D J Human
Chairperson: Research committee: Faculty of Theology and Religion

Dr JW Beukes
Chairperson: Research Ethics committee: Faculty of Theology and Religion

Appendix E- Supervisors Approval

Student no: 21473057
Our ref: Mrs MD Mokgokolo
Tel: 012 420 2700
Email: doris.mokgokolo@up.ac.za

2023-04-19

Mr D Makwetse
2903 Dulibadzimu
Beitbridge
Beitbridge
Zimbabwe

Dear Mr Makwetse

TITLE AND SUPERVISOR APPROVAL

I have pleasure in informing you that your approved title and supervisor for **MTh Practical Theology** are as follows:

Title:

SUPERVISOR: Prof MJ Masango

You are advised to acquaint yourself with Regulations in the publication 'General Regulations and information'.

Your registration as a student must be renewed annually before 28 February until you have complied with all the requirements for the degree. You will only be entitled to the guidance of your supervisor if annual proof of registration is submitted.

You are welcome to contact us at the abovementioned telephone number or email address if you have any enquiries.

Yours sincerely

for DEAN:
Faculty of Theology and Religion
PDS

University of Pretoria
Private Bag X20
Hatfield
0028

Tel: +27 (0)12 420 3111
Email: [illegible]

www.up.ac.za