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DRUG ABUSE AMONG NIGERIAN ADOLESCENTS STRATEGIES FOR COUNSELLING

Dorcac Oluremi FAREO*

Abstract

Adolescents prefer an autonomous and independent life that is free from adult control, there by engaging in various delinquent acts (drug abuse, rape, robbery, cultism and vandalism) that are dangerous to the home, community, school and the nation. The impact of drug abuse among adolescents has been a stigma of moral decadence, violence, thugery, assault, madness and murder.

The menace of drug abuse has eaten deep into the fabrics of our society; however, with effective counselling programmes, the problems can be tackled through campaign against drug abuse by government and other relevant authorities Drug control counselling centres should be established in every community and qualified health counsellors should be employed in helping drug addicts by giving them special advice on how to go about the withdrawal system. Drug awareness units to be set up in all states by the federal, state and local government not to try people who use drugs as criminals, but to help solve their socio-psychological problem. This paper discusses the concept of drug abuse, types, theories of causes, signs and symptoms, effects, and strategies for counselling.

Key Words: Drug Abus, Drug Dependence, Adolescents, Peer Group, Experimentation.

Introduction

Since the early times, herbs, leaves and plants have been use to heal and control diseases. The use of drugs in itself does not constitute any danger, because drugs correctly administered have been a blessing. Falco (1988) as cited by Sambo (2008) viewed that "chronic use of substances can cause serious, sometimes irreversible damage to adolescent's physical and psychological development. The use of drugs could be beneficial or harmful depending on the mode of use.

A drug refers to a substance that could bring about a change in the biological function through its chemical actions (Okoye, 2001). It is also considered as a substance that modifies perceptions, cognition, mood, behaviour and general body functions (Balogun, 2006). They could

* Ph.D.,Department of Educational Foundations and Counselling, Obafemi Awolowo University.

thus, be considered as chemical modifiers of the living tissues that could bring about physiological and behavioural changes (Nnachi, 2007).

Drug abuse is a major public health problem all over the world (UNODC) (2005). The use and abuse of drugs by adolescents have become one of the most disturbing health related phenomena in Nigeria and other parts of the world (NDLEA; 1997). Several school going adolescents experience mental health programme, either temporarily or for a long period of time. Some become insane, maladjusted to school situations and eventually drop out of school.

According to Fawa (2003), "Drug is defined as any substance, which is used for treatment or prevention of a disease in man and animals. Drug alters the body functions either positively or otherwise depending on the body composition of the user, the type of drug used, the amount used and whether used singly or with other drugs at the same time".

NAFDAC (2000) as cited by Haladu(2003) explained the term drug abuse as excessive and persistent self-administration of a drug without regard to the medically or culturally accepted patterns. It could also be viewed as the use of a drug to the extent that it interferes with the health and social function of an individual. World Book Encyclopedia (2004) defined drug abuse as the non-medical use of a drug that interferes with a healthy and productive life Manbe (2008) defined drug abuse as the excessive, maladaptive or addictive use of drugs for non-medical purpose.

Abdulahi (2009) viewed drug abuse as the use of drugs to the extent that interferes with the health and social function of an individual. In essence, drug abuse may be defined as the arbitrary overdependence or mis-use of one particular drug with or without a prior medical diagnosis from qualified health practitioners. It can also be viewed as the unlawful overdose in the use of drug(s).

Odejide (2000) warned that drug abusers who exhibit symptoms of stress, anxiety, depression, behaviour changes, fatigue and loss or increase in appetite should be treated by medical experts and counsellors to save them from deadly diseases.

Types of Drug Abuse

In Nigeria, the most common types of abused drugs according to NAFDAC (2000) as cited by Haladu (2003) are categorized as follows:-

1. **Stimulants:** These are substances that directly act and stimulate the central nervous system. Users at the initial stage experience pleasant effects such as energy increase. The major source of these comes from caffeine substance.
2. **Hallucinogens':** These are drugs that alter the sensory processing unit in the brain. Thus, producing distorted perception, feeling of anxiety and euphoria, sadness and inner joy, they normally come from marijuana, LSD etc.
3. **Narcotics:** These drugs relieve pains, induce sleeping and they are addictive. They are found in heroin, codeine, opium etc.
4. **Sedatives:** These drugs are among the most widely used and abused. This is largely due to the belief that they relieve stress and anxiety, and some of them induce sleep, ease tension, cause relaxation or help users to forget their problems. They are sourced from valium, alcohol, promotazine, chloroform.
5. **Miscellaneous:** This is a group of volatile solvents or inhalants that provide euphoria, emotional disinhibition and perpetual distortion of thought to the user. The main sources are glues, spot removers, tube repair, perfumes, chemicals etc.
6. **Tranquilizers:** They are believed to produce calmness without bringing drowsiness, they are chiefly derived from Librium, Valium etc.

Theories of Drug Abuse

Theories of drug abuse indicate that some people truly depend on certain drugs for their survival due to a number of factors. The major emphasis of the theories is that people have their individual reasons for depending on one type of the drug or the other. Such reasons, according to Eze and Omeje (1999) are explained by the following theories. Personality theory of drug abuse, learning theory of drug abuse, biological theory of drug abuse and socio-cultural theories

- (a) **Personality Theories of Drug Abuse:** The main emphasis of the theories are that there are certain traits or characteristics in the individuals that abuse drugs. Such personality characteristics, according to Eze and Omeje (1999) are inability to delay gratification, low tolerance for frustration, poor impulse control, high emotional dependence on other people, poor coping ability and low self esteem. Individuals with these personality characteristics find it difficult to abstain from drug abuse.
- (b) **Learning Theory of Drug Abuse:** It maintains that dependence or abuse of drugs occurs as a result of learning. The learning could be by means of conditioning, instrumental learning or social learning.
- (c) **Biological Theory of Drug Abuse:** The theory maintains that drug abuse is determined by the individuals biological or genetic factors which make them vulnerable to drug addiction
- (d) **Socio-cultural Theories of Drug Dependence/Abuse:** The theories maintain that abuse is determined by socio-cultural values of the people. For instance, while certain cultures permit the consumption of alcohol and marijuana, other cultures do not. Among the Urhobo, Ijaw, Ibibio, Edo, Igbo, Yoruba and Itsekiri, alcohol i.e. Oogoro is used in cultural activities. In Northern Nigeria, alcohol is forbidden due to Sharia law.

However, the sharing law does not forbid cigarette consumption and thus nicotine dependence. It should be noted, however that no theory fully explains the etiology of drug abuse. This is due to individual differences. It then becomes obvious that the disorder (drug abuse) is an acquired one. The acquisition, then is dependent on a host of personal inclinations and environmental factors, a situation explained suggestively by Bandura (1986) social cognitive theory, i.e the triadic reciprocity involving behaviour, environment and the person.

Causes of Drug Abuse

Haladu (2003) gave the following as the main causes'

- i. **Experimental Curiosity:** Curiosity to experiment the unknown facts about drugs thus motivates adolescents into drug use. The first experience in drug abuse produces a state of arousal such as happiness and pleasure which in turn motivate them to continue.
- ii. **Peer Group Influence:** Peer pressure plays a major role in influencing many adolescents into drug abuse. This is because peer pressure is a fact of teenage and youth life. As they try to depend less on parents, they show more dependency on their friends. In Nigeria, as other parts of the world, one may not enjoy the company of others unless he conforms to their norms.
- iii. **Lack of parental supervision:** Many parents have no time to supervise their sons and daughters. Some parents have little or no interaction with family members, while others put pressure on their children to pass exams or perform better in their studies. These phenomena initialize and increases drug abuse.
- iv. **Personality Problems due to socio-Economic Conditions:** Adolescents with personality problems arising from social conditions have been found to abuse drugs. The social and economic status of most Nigerians is below average. Poverty is widespread, broken homes and unemployment is on the increase, therefore our youths roam the streets looking for employment or resort to begging. These situations have been aggravated by lack of skills, opportunities for training and re-training and lack of committed action to promote job

creation by private and community entrepreneurs. Frustration arising from these problems lead to recourse in drug abuse for temporarily removing the tension and problems arising from it.

- v. **The Need for Energy to Work for Long Hours:** The increasing economic deterioration that leads to poverty and disempowerment of the people has driven many parents to send their children out in search of a means of earning something for contribution to family income. These children engage in hawking, bus conducting, head loading, scavenging, serving in food canteens etc and are prone to drug taking so as to gain more energy to work for long hours.
- vi. **Availability of the Drugs:** In many countries, drugs have dropped in prices as supplies have increased.
- vii. **The Need to prevent the Occurrence of Withdrawal symptoms:** If a drug is stopped, the user experiences what is termed "withdrawal symptoms". Pain, anxiety, excessive sweating and shaking characterize such symptoms. The inability of the drug user to tolerate the symptoms motivates him to continue (Ige, 2000).

Signs and Symptoms of Drug Abuse

According to Adolescents Health Information Project AHIP (2001) the following are signs and symptoms of drug abuse. They are:

- a. **Signs of Drug Used and Drug Paraphernalia**
 - i. Possession of drug related paraphernalia such as pipes, rolling paper, small decongestant
 - ii. Possession of drugs, peculiar plants or bolts, seeds of leaves in ashtrays or clothing pockets.
 - iii. Odour of drugs, smell of incense or other cover up scents.
- b. **Identification with Drug Culture**
 - i. Drug related magazines, slogans on clothing
 - ii. Hostility in discussing drugs
- c. **Signs of Physical Deterioration**
 - i. Memory lapses, short attention span, difficulty in concentration.
 - ii. Poor physical coordination, slurred or incoherent speech; unhealthy appearance, indifference to hygiene and grooming
 - iii. Bloodshot eyes, dilated pupils.
- d. **Changes in Behaviour**
 - i. Distinct downward performance in school place of work.
 - ii. Increased absenteeism or tardiness.
 - iii. Chronic dishonesty, lying; cheating and stealing.
 - iv. Trouble with the police and other law enforcement agencies
 - v. Change of friends, evasiveness in talking about new ones.
 - vi. Increasing and inappropriate anger, hostility, irritability, sectraveness etc.
 - vii. Reduce motivation, energy, self-discipline, self esteem etc.

The Effects of Drug Abuse

Mba (2008) identified numerous negative effects of drug abuse on the body chemistry as follows:

- 1. **Alcohol-related problems includes:**
 - a. Physical problems e.g liver cirrhosis, pancreatic, peptic ulcer, tuberculosis, hypertension, neurological disorder.
 - b. Mental retardation for the fetus in the womb, growth, deficiency, delayed motor development.

- c. Craniofacial abnormalities, limbs abnormalities and cardiac deficits.
 - d. Psychiatric e.g pathological drunkenness, suicidal behaviour
 - e. Socially-broken homes, increased crime rate, sexual offences, homicide and sexually transmitted diseases.
2. Tobacco: Causes stimulation of heart and narrowing of blood vessels, producing hypertension, headache, loss of appetite, nausea and delayed growth of the fetus. It also aggravates or causes sinusitis, bronchitis, cancer, strokes, and heart attack.
 3. Stimulants: Lethargy, irritability, exaggerated self confidence, damage nose linings, sleeplessness, and psychiatric complications.
 4. Inhalants: Causes anemia, damage kidney and stomach bleeding.
 5. Narcotics: Causes poor perception, constipation, cough, suppression, vomiting, drowsiness and sleep, unconsciousness and death.

Incidence of Drug Abuse among Nigerian Adolescents

Students, especially those in secondary school tend to see the drug user as one who is tough, bold and strong. Many youngsters have been known to use drugs at the instance of peers, elders or siblings. Students who usually feel inadequate have been known to use drugs to achieve social acceptance. Esen (1979) stated that Nigerian secondary school adolescents under the influence of Indian hemp shed all inhibitions and produce behaviour that is inconsistent with school discipline. He went further to observe that the increasing incidence of drug abuse among secondary school students is a contributory factor in the ugly confrontation between school administration and students.

Odejide, (1979); Ogunremi and Rotimi, (1979); Agunlana, (1999); Ubom, (2004); Obiamaka, (2004); Okorodudu and Okorodudu, (2004) in their research work indicated that the problem of drug abuse know no boundaries or social class. It impedes the development of any society as it is a threat to life, health, dignity and prosperity of all individuals. Fayombo and Aremu (2000) in their research on the effect of drug abuse on educational performance of some adolescent drug abusers in Ibadan found that the misuse of marijuana had reached an epidemic level in the present Nigeria society, and that drug abuse could lead to reduce academic achievement or even halt one's entire academic process. Adesina, (1975); Ekpo, (1981); and Orubu, (1983) in their studies dwelled extensively on reasons students use drugs include success in examination, social acceptance and initiation of peers. Olatunde (1979) states that Nigerian adolescents take drugs such as amphetamines and pro-plus as aid for success in examination. He postulated that those who take drugs as aid for studies toward examinations are those with poor academic records, a history of instability and family/social problems, while others, he commended; use rugs to increase their self confidence, heighten pleasure, cope with feelings of depression and inadequacy, and to facilitate communication.

Idowu (1987) found that students smoke and use drugs at the instance of friends/peers, parents and television/radio advertisements. Oladele, (1989); Okorodudu and Okorodudu (2004); and Enakpoya (2009) in their studies showed that adolescents were very susceptible to the influence of their peers.

Osikoya and Ali (2006) asserted that socially, a drug abuser is always pre-occupied with how to obtain drug of choice and crave for the substance. Kobiowu (2006) study revealed that the academic pursuits of those undergraduates who engages in drug misuse is not unduly jeopardized, and that the abusers do not socialize extraordinarily, contrary to seemingly popular expectation.

Studies by Okoh (1978), Oduaran (1979) and Johnson (1979) exhibit a plethora of purposes for which students use drug. The list includes curiosity, boldness, friends-do-it, enjoyment of social gathering, academic pressure, sound-sleep, sexual-prowess, and performance in sports. Drug

abuse is a very serious problem among school adolescents and which has slowly made the average Nigerian student to be maimed, sentenced to a life of delinquency, insanity, street walking and premature death.

Strategies for Counselling

The following counselling strategies are suggested to help reduce drug abuse among adolescents.

Establishment of Family Education on Drugs: The family is the nucleus of the social organization. Parents should give their children appropriate education on drug use. They should be encouraged by health authorities to offer family education on drug abuse to their children. They should inform them of the dangers of drug abuse and dependence on their health, society and the nation.

Establishment of Counseling Centres for Drug Control: Counselling centers should be established in every community by the government or private individuals. Qualified health counsellor should be employed in helping drug addicts or those dependent on drugs by giving them special advice on how to go about the withdrawal system.

Designing Curricula on Drug Education: Ministry of education (State and Federal) should as matters of urgency add to the curricula- drug education at all levels of education.

Campaign against Drug Abuse: National Drug Law Enforcement Agency (NDLEA) should intensify their campaigns on antidrug in order to have a drug free society. The campaign against use of certain drugs and misuse of drugs should be more intensified at the secondary school level because it is the peak of adolescent. Also, government and other relevant authorities should launch out campaigns against drug abuse as well as dependence.

Effective study Habit for Students: An effective study is that which centers on a well planned scheme of study involving sufficient recreational activities, enough resting time and sleep. Thus, such well planned time table of study habits that make adequate provision for rest will enhance good study habit without necessary resorting to the use of drugs to keep students artificially awake.

Establishment of Drug Awareness Units: Drug awareness units to be set up in all states and moderated by the federal state and local governments. It should not be a panel established to try people who use drugs as criminals, but to help solve their socio-psychological problem.

Parents and adults should refrain from using drugs in discriminately in the presence of youngsters and they should discourage their wards/children from associating with "unknown" gangs or suspicious neighbourhood peer groups.

Conclusion

Drug abuse is a problem that is causing serious concern to both individuals and government all over the world. The problem is prevalent among adolescents who in most cases are ignorant about the dangers inherent in drug abuse. Many of them engaged in drug abuse out of frustration, poverty, lack of parental supervision, peer influence and pleasure. However, with effective counselling programme, the problems can be tackled.

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