

Drug Abuse and the Nigerian Youth: An Empirical Review of Issues and the Need for Preventive Policy

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ABSTRACT This study examines secondary school students' perception of the consequences of substances-marijuana, alcohol, tobacco, tranquilizer, heroin and cocaine- reported to have been extensively abused in Nigeria. Subjects for the study were four hundred and fifty students drawn randomly from fifteen mixed sex as well as single sex secondary schools in Ondo State, Nigeria. The results, using a two-way Analysis of Variance, indicated that students' perception of the consequences of drug abuse does not prevent them from taking drugs. There is a significant difference between mixed and single sex secondary school students' perception of the role of school counselors. The positive perception of the role of school counsellor in the prevention of drug abuse by the male drug abusers showed that school counselors were not making enough impact in the area of drug abuse and its prevention.

INTRODUCTION

The many kinds of drugs people use can be classified in several ways. For example, they can be grouped according to their form, such as a capsule, and liquid. Or, they can be classified according to the way they are taken such as by swallowing, inhaling or injection. But pharmacologists generally classify drugs according to the major beneficial effect they have on the body. And, classified in this way, many of the most important and widely used drugs fall into one of four groups viz:

- drugs that fight bacteria (i.e. antibiotics and sulfonamides)
- drugs that prevent disease (i.e. vaccines and antiserums)
- drugs that affect the heart and blood vessels (i.e. cardiovascular drugs)
- drugs that effect the nervous system (i.e. analgesics, anesthetics, hallucinogens, stimulants and depressants) (Cafruny, 1976).

The fact that certain drugs can produce enormously beneficial results has created the

false notion that pills will solve all problems. Drugs that affect the mind can have subtle or obvious side effects. These can be immediate or may become evident only after long, continuous use.

Drug abuse is an elusive term and has been defined by scholars in different ways. According to Einstein (1975), the term drug abuse can be defined as the use of a culturally or legally stigmatized drugs and substances. While De Ropp (1961) defined drug abuse as the use of psychoactive substances, Omoluabi (1987) and Ajila (1999) see it as the use of drug above the prescribed dosage and for purposes other than the original prescription. In this study therefore, drug abuse simply means intentionally bad or wrong use of drugs in ways that such drugs become injurious to the body to the extent of having bad consequences to the society at large.

It is through drug abuse we have come to know about drug addiction and how people become drug addicts. To be simply put, drug abuse makes people who have been so involved in the excessive use of drugs to become drug addicts. And, drug addicts are chronically sick people whose ailment shows itself in their behavior, which is generally disorderly and anti-social. Unlike many other maladjusted individuals, they have turned to something outside themselves to find the characteristic inadequate but temporarily satisfying solution to their problems. This is why some criminologists have claimed that some deviants may not leave the social world physically, but do so psychically. Hence, drug users at least initially prefer to cultivate the gardens in their minds rather than the gardens in suburbia.

LITERATURE REVIEW

A brief review of the consequences of

substances reported to have been extensively abused in Nigeria is presented below:

Marijuana

Studies (Hilgard et al., 1953) have shown that this drug is derived from hemp. In Nigeria, this drug is known by various names including "ganja", "igbo", "weewee", "winiwini", Indian hemp", "cannabis", "shit", "kpakpa", "pot", "grass", and "weed" (Makinde, 1974; Nevadomsky, 1979). According to Pela and Ebie (1982), the mode of consumption of this drug in Nigeria is by smoking the prepared leave and flowering seeds. On the use of marijuana, Pela and Ebie (1982) further explicated that there are no known medical uses of the drug in Nigeria. They added that the effect, which appear to depend on the potency of the preparation and the amount consumed, are both psychological and behavioral. Other studies on the effects of marijuana claimed that the dried leave of the plant has the effects of driving smokers completely insane. The addict loses all sense of moral responsibility. Addicts while under the influences of marijuana are immune to pain and could be severely injured without having any realization of their condition.

While in the condition, they become raving maniacs and liable to or indulge in any form of violence to other persons using the most savage methods of cruelty without any sense of moral responsibility (Cook, 1971).

Alcohol

Alcoholic drink is any beverage that contains ethyl alcohol in intoxicating quantity. The amount of alcohol may be as little as 2% as in some beer or wine, or it may be as much as 68% as in "ogogoro" (Orubu, 1980). Alcohol is a depressant, not a stimulant (Smith and Gips, 1966; Maddox, 1970). Many users claim that alcohol exits rather than depresses them. However, the feeling of stimulation results from the lessening of inhibition.

Alcohol abuse has not yet received sufficient public attention though it is on the increase (Anumonye, 1980). Pela and Ebie (1982) reported that the astronomical increase in the number of

breweries in Nigeria has brought, on the one hand, considerable economic reward to Government and investors, while on the other hand, it is beginning to cause concern over alcohol related problems and their attendant economic, social and medical adverse effects upon the individual, family and community. According to Owuamanam (1987), among the consequences of drinking alcohol reported are: drunkenness, physiological damage, traffic and other accidents.

Barbiturates

Research findings on barbiturates have shown that they are a group of central nervous system depressants that are highly psycho-physiological addictive (Cafruny, 1976). Since the barbiturates have legitimate medical uses, they are often available in commercial form under trade names such as Nembutal, Seconal and Veronal. The user experiences a sense of relaxation similar to the effects of alcohol. According to Pela and Ebie (1982), research findings in Nigeria (Anumonye, 1980 and Nevadomsky, 1981) are in agreement with the fact that the extent of dependence on sedatives is second in rank only to dependence on alcohol (Anderson and Solomon, 1974).

Amphetamines

Amphetamines are powerful stimulant sold under trade names such as Benzadnil, Dexedrine and Methedrine, and known colloquially by many names including "speed", "uppers" (Hilgard et al., 1953). McCandless and Coop (1974) studies show that amphetamines increase alertness, fight fatigue and drowsiness and provide the user with a sense of euphoria. Amphetamines act on the central nervous system, producing various effects such as restlessness, feeling of excitation, nervousness, mental disorders, insomnia and over stimulation of the adrenal glands (Makinde, 1974).

In Nigeria, the legal importation of amphetamines is controlled by the Federal Ministry of Health. Although the medical use of such drugs is not approved, they are prescribed and dispensed by medical doctors and

pharmacists to patients for weight control purposes (Pela and Ebie, 1982). They i.e. Pela and Ebie) further reported that due to poor enforcement of unclear drug laws, these drugs have found their ways into Nigeria via illegal routes and are widely marketed by patent medicine dealers.

Tranquilizers

According to Folawiyo (1985), tranquilizers were developed in the 1950s as milder and safer alternatives to barbiturates as sedatives. Investigations have shown that increase intake of tranquilizers is very dangerous. According to Aina (1987), tranquilizers when abused are a slow killer. The drug has addictive effects and wears down the body defenses instead of strengthening them. Aina's view were supported by Peter Obaseki and Funso Eniojukan, doctors at the School of Pharmacy, College of Medicine, University of Lagos, they claimed Tranquilizers cause perpetual drowsiness, tiredness, giddiness, reduction of libido in men and menstrual irregularities (in women).

Tobacco

Researches have shown that tobacco smoking plays a major role as a facilitator of social interaction. And, those users frequently report that cigarettes help them to relax (McCandles and Coop, 1974). Consequently, there have been reports in the literatures that typical symptoms experienced while withdrawing from cigarette smoking include nervousness and anxiety, drowsiness, light-headache, headache, fatigue, sweating, insomnia and weight gain (ibid).

Many studies also provide conclusive evidence that cigarette smoking is by far the most important variable related to lung cancer and is also a major factor in coronary heart disease, chronic bronchitis, emphysemas and various other diseases (Brecher et al., 1972).

LSD, Heroin and Cocaine

According to Pela and Ebie (1982), in Nigeria, the abuse of heroin and LSD (Lysergic acid diethylamide) is not widespread. Blum (1964)

refers to LSD as "utopiate". Louria (1966) calls it a "Nightmare drug". He further stated that LSD produces a profound alteration of sensory, perceptual, cognitive and emotional experiences, and supporting this view, Hilgard et al. (1953) reported that one problem with LSD is that its effects are highly individual and unpredictable. Some users have vivid hallucinatory experiences of colours and sounds.

According to Igbeare (1985), heroin and cocaine are not widely used in Nigeria. But availability resulting from current use of Nigeria as channel of global trafficking may result in what Ogugbuaja calls "sociological infection" whereby more Nigerians may try out these drugs. Lawrence Kolh, as reported in *The Guardian* (March 26, 1985) points out "opiates reduce ambition, reduce sexual desire almost to vanishing point, produce a feeling of lethargy and encourage idleness. Above all, they enslave and the slavery they impose is absolute". Supporting Kolb's view, Adenika (1985) stated that in professional medical use, opiates and their derivatives are among the most powerful painkillers and sleep-inducing drug known to man. Opiates give a sense of euphoria and contentment. They are highly addictive and regular use reduces appetite, lower general health and sex drive.

Pace (1985), an American drug expert, pointed out that taking cocaine is like playing with a loaded gun. Cocaine kills by interfering with breathing and disrupting the heart rhythm ultimately causing heart failure. Cocaine has been shown to increase heart rate, increase blood pressure, increase respiration rate and have a variety of effects that make people want to take it, over and over again.

Apart from the variation of the effects of drugs on the individual, which has been variously appraised by the foregoing scholars and authors, drugs and their relations to human existence have been viewed by other scholars from the angle of their (drugs) being abused by human beings:

In line with the foregoing, the following null hypotheses were formulated for scientific testing:

- There is no significant difference between students in mixed and single sex secondary schools as to their perception of the consequences of drug abuse.

- There is no significant difference between students in mixed and single sex secondary schools as to their perception of the role of school counselors in the prevention of drug abuse.

METHODOLOGY

Subjects

The subjects between the ages of 13 and 21 were four hundred and fifty students made up of 225 male and 225 female students drawn randomly from fifteen mixed sex as well as single sex secondary schools. The fifteen secondary schools were selected (using a table of random numbers) from ten of the twenty-six local government areas in Ondo State. Thirty participants (10 students each from SS I, SS II and SS III) were selected randomly from each type of school. The distribution of students' sample by age, sex and type of schools is as shown in table 1 below:

Instrument

The questionnaire designed by the researcher was used for this study. The first section sought information on personal background of the subjects and types of drugs they have used with or without doctor's prescription. Twelve types of drugs were listed and grouped under three categories, namely: Hallucinogen, Depressant/Sedative, and Stimulant.

The items in the second section of the instrument involved Likert's scale close-ended four points continuum. This was used to elicit information from our sampled subjects as to their perception of the consequences of drug abuse and the role of school counsellors in the prevention of drug abuse. The responses were coded as follows: 4 for Strongly Agree, Agree=3, Disagree=2, Strongly Disagree=1.

DATA ANALYSIS

The responses of the items of the subjects to questionnaire were compiled into contingency tables according to the main variables under investigation. Analyses were carried out using a two-way Analysis of Variance (2-way ANOVA) to determine whether there is any significant difference between mixed and single sex secondary school students in respect of the variables. The 0.05 levels of significance were used for the acceptance or rejection of the hypotheses. Table 2 to 5 present the results of the analysis of the findings with respect to the hypotheses:

H₀₁. "There is no significant difference between students in mixed and single sex secondary schools in their perception of the consequences of drug abuse".

Table 2 and 3 below presents the row and column totals on students perception of the consequence of drug abuse, and the 2-way ANOVA summary respectively.

Table 1: The distribution of students' sample by age, sex and type of school

Age in Years	Type of School						Both Sexes
	Mixed Sex		Single Sex		Total		
	No. of M (%)	No. of M (%)	No. of M (%)	No. of M (%)	M (%)	M (%)	
13	-	-	3(2)	1(0.7)	3(1.3)	1(0.4)	4(0.9)
14	1(1.3)	1(1.3)	9(6)	9(6)	10(4.4)	10(4.4)	20(4.4)
15	17(22.7)	13(17.3)	27(18)	29(19.3)	44(19.4)	42(18.7)	86(19.1)
16	25(33.3)	21(28)	41(27.3)	49(32.7)	66(29.3)	70(31.1)	136(30.2)
17	15(20)	24(32)	36(24)	35(23.3)	51(22.7)	59(26.2)	110(24.4)
18	10(13.3)	12(16)	22(14.7)	19(12.7)	32(14.2)	31(13.8)	63(14)
19	4(5.3)	3(4)	6(4)	6(4)	10(4.4)	9(4)	19(4.2)
20	1(1.3)	-	3(2)	2(1.4)	4(1.8)	2(0.9)	6(1.3)
21	2(2.6)	1(1.3)	3(2)	-	5(2.2)	1(0.4)	6(1.3)
Total	75(100)	75(100)	150(100)	150(100)	225(100)	225(100)	450(100)

Table 2: Row and column total on students perception of the consequence of drug abuse

Type of School and Sex		Abusers	Non Abusers	Total
Single sex	M	1515	1231	2746
	F	958	1575	2533
Mixed sex		1186	1340	2526
Total		3659	4146	7805

The table above shows that there are more abusers in single-sex institutions than mixed sex institutions or rather, that students in single institutions abuse drugs more than students in mixed sex institutions. Consequently, boys in single sex institution realised the consequences of drugs abuse more than girls in the same type of institution.

The row and column effect at $F(2,24) = 0.47$ and $(1,24) = 3.36$, while the table values are 3.40 and 4.26 respectively. Thus ($F_c < F_t$), the calculated value is less than table value. There is therefore no significant difference between male and female students in their perception of the consequences of drug abuse.

The interaction and between group affects at $F(2,24) = 6.06$ and $(5,24) = 3.08$, while the table values are 3.40 and 2.62 respectively. Thus, $F_c > F_t$ (i.e. $6.06 > 3.40$ and $3.08 > 2.62$) at 0.05 levels. Hence, the hypothesis that there is no significant difference between students in mixed and single sex secondary schools in their perception of the consequences of drug abuse was rejected. The result is therefore significant.

Ho2. "There is no significant difference between students in mixed and single sex secondary schools as to their perception of the role of school counselors in the prevention of drug abuse".

Tables 4 and 5 below show the row and col-

umn totals, and the 2-way ANOVA Summary respectively.

The table 4 shows that boys (abusers) in single sex institutions have positive perception of the role of school counselors in the prevention of drug abuse, while among the non-abusers, girls in single sex institutions have a positive perception.

The row effect at $F(2,24) = 0.02$, while the table value is 3.40. Thus, $F_c < F_t$ (i.e. $0.02 < 3.40$) at 0.05 levels. Hence, there is no significant difference between male and female students in their perception of the consequences of drug abuse.

The column effect at $F(1,24) = 16.02$, while the table value is 4.26. The calculated value is greater than the table value. Thus, $F_c > F_t$ (i.e. $16.02 > 4.26$). There is a significant difference between the abusers and the non-abusers in their perception of the consequences of drug abuse.

The interaction effect at $F(2,24) = 3.40$, while the table value is 3.40. The calculated value is equal to the table value. The hypothesis stated was therefore rejected, hence the result is significant.

The between group effects of $F(4,240) = 4.57$, while the table value is 2.62. Thus, $F_c > F_t$ (i.e. $4.57 > 2.62$) at 0.05 level. There is therefore a significant difference between mixed and single sex secondary school students' perception of the role of school counselors.

DISCUSSION AND CONCLUSION

The hypothesis that there is no significant difference between students in mixed and single sex secondary schools as to their perception of the consequences of drug abuse was rejected. A possible explanation for the way the result came

Table 3: 2-way ANOVA summary on students' perception of the consequences of drug abuse

Source	ss	Df	ms	F	Significant level
Row	3127.3	2	1563.65	0.47**	0.05
Column	7905.7	1	7905.7	2.36**	0.05
Interaction	40600.4	2	20300.2	6.06*	0.05
Between Group	51633.4	5	10326.68	3.08*	0.05
Within Group	80416.8	24	3350.7		
Total	132050.2	29			

* $P < 0.05$ (significant Result)

** $P > 0.05$ (Result not significant)

Table 4: Row and column totals of students' perception of the role of school counsellors in preventing drug abuse

Type of School And Sex		Abusers	Non Abusers	Total
Single Sex	M	218	234	452
	F	157	297	454
Mixed Sex		184	261	445
Total		559	791	1351

off could be that students' perception of the consequence of drug abuse does not prevent them from taking drug, more so that a lot of the abusers do not see any immediately negative consequences in abusing drugs.

The second hypothesis resolved in favour of a significant difference between students (abusers and non-abusers) in mixed and single sex secondary schools as to their perception of the role of school counselors in the prevention of drug abuse.

Table 5: 2-way ANOVA summary on the role of school counsellors in preventing drug abuse

Source	ss	df	ms	F	Significant
Row	4.5	2	2.25	0.02**	0.05
Column	1809.7	1	1809.7	16.02*	0.05
Interaction	768.8	2	384.4	3.40*	0.05
Between Group	2583	5	516.6	4.57*	0.05
Within Group	2712	24	113		
Total	5295	29			

*P < 0.05 (Significant Results)

**P > 0.05 (Result not Significant)

The reason for the significant difference might be due to the fact that students in the mixed sex schools are ignorant about the role of the school counselors in the prevention of drug abuse. Or, have not felt the impact of school counsellors in the prevention of drug abuse. Probably because the school counsellors have been much more pre-occupied by counseling services in other areas of students' behaviour activities.

Another explanation might be that the mixed sex schools used probably lack experienced counselors, hence students in such schools were not well exposed to the dangers of drug abuse, unlike in the single sex schools where in addition to the counsellors efforts, there used to be seminars and symposiums exposing students to the side effect of drug abuse.

The fact that despite the positive perception of the role of school counsellors by the students

(male particularly), they still abused drugs thus calls for the involvement of school counselors in the areas of counseling the students against drug abuse.

From the results of this study, it is evident that:

- Students' perception of the consequences of drug abuse does not prevent them from taking drugs.
- The positive perception of the role of school counselor in the prevention of drug abuse by the male drug abusers showed that school counselors were not making enough impact in the area of drug abuse and its prevention.

Based on the foregoing, it is our conclusion that there is the urgent need for the prevention of drug abuse among our youths. However, such prevention can only be achieved mainly through effective health education. The role of the school

counsellors in this regard can therefore not be over-emphasized.

The main focus of such education should be on the "non-users" who are exposed to all information about drug use and consequences of abuse. They (the non-users) should be discouraged from "experimenting" the use of drug in the first distance since they may enjoy the effect of the experiment and try again thereby creating a vicious circle of abuse.

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