



---

## **DRUG ABUSE AND DRUG ADDICTION : ISSUES, CHALLENGES AND THE WAY FORWARD**

**AME: IFEANACHO CAROLINE CHINWE (Ph.D.)**

Department of Business Administration and management (BAM) school of business studies,  
Federal Polytechnic, Oko Anambra State

### **Abstract**

Drug abuse and addiction are increasingly becoming a menace globally. The devastating effects of drug misuse and addiction on individual, families and the society at large are unimaginable. The calamitous effects of the use of illicit drugs on the life, careers and health of the youths cannot be over-emphasized. Drug related problems/ issues pose daunting challenges not only to Nigeria but to countries worldwide. Their negative impacts have a multiple effects on the economy as they affect life socially, economically and psychologically. The paper therefore, examines the challenges, academic cum health implications, causes and consequences of drug abuse and addiction and finally, charts the way forward for effectively combating the vice and its related problems.



---

## INTRODUCTION

Unarguably, drug abuse and drug addiction have wrought massive devastation not only to individuals/families and educational institutions but also to the society at large. The calamitous effects of the drug abuse and use of illicit drugs cannot be overemphasized. Thus, the alarming rate in the increase of mentally deranged youths that roam about the streets of Nigeria, neurotic personalities, school dropouts and broken homes should be a major source of concern to patriotic Nigerians. The situation no doubt poses a daunting challenge to the nation. There is no gain-saying the fact that the ugly situation which has multiplier effects on the nation/economy is a serious threat to the nation since the segment of the society deeply involved is the youth — the soul, heart and pillar of the nation. Such a deviant behaviour is out of sync with the societal norms and values and if the tide is not stemmed on time would seriously affect the nation. Notably, the general increase in the number of youths engaged in the use of illicit drugs (including students in the secondary and tertiary institutions) might be responsible for the general decline in the quality of graduates being churned out presently in the country. The dictum that the youths are the pillars of the nation and leaders of tomorrow is incontestable. Dishearteningly, with the

degenerating situation in the country there is genuine fear that many of the youths may not be able to take up their rightful positions in the society because of being entangled in the menace of drug abuse / addiction, which no doubt has reduced many of them to deviants, thugs and agents of destructions.

Drug abuse/addiction is becoming increasingly problematic as its negative impacts traverse all levels — family, educational institutions and the entire society. Observably, most Nigerian youths experiment with drugs at some point in their life particularly alcohol and nicotine. The foremost concern is that a good number of these youths might become addicted to the dangerous drug thereby jeopardizing their health, careers and worse still creating problems to their families and becoming security threats in the neighborhood. In fact its unimaginable and deleterious consequences on the academic, health, social, psychological and physical development of the victims cannot be overemphasized. Admittedly, the use of illicit drugs has rendered many youths



useless and even led to the death of many of them, their parents and loved ones. It's devastating effects on the family, educational institutions and the entire society is immeasurable. Evidence abounds that drug abuse/addiction not only jeopardizes the academic pursuit/careers of the victims but also results in their death. The situation is worrisome and therefore needs to be urgently addressed and redressed. Against, this backdrop therefore, the paper focuses on the following:

- conceptual issues
- Theoretical Underpinnings of Drug Abuse and Addiction.
- Drug abuse/addiction: global trends and challenges
- Drug abuse/addiction and educational Implications among youth.
- . Drug abuse/addiction and Health Implications
- Causes and consequences of drug abuse/addiction.
- Guidance/Counselling panacea for combating drug abuse/addiction.
- The Way forward V

### **Conceptual Issues**

For the purpose of clarity and unimpeded comprehension, "Education", "Youth", "Drug", "Drug abuse" and "Drug addiction" are conceptually clarified and contextualized to make the discussion meaningful and lucid.

### **Education**

There are many definitions of education as there are definers, each portraying the 1 definers' educational background, experiences, exposures and philosophical perceptions.

V Some of the definitions are x-rayed below.



Education is a process through which the young acquire the ability to be useful to himself and to others; a process through which man realizes his potentials and uses same for self fulfillment in the service of himself and others (Ocho, 2000:31;Ngwoke, 2006: Ejiofor, 2003: Enyi, 2004:91; Adepoju, 2004:26). The buildingblock for social and economic construction. The most effective way to break away from the vicious cycle of underdevelopment, poverty, ignorance, disease, chroniceconomic dependence and political instability is through qualitative and functional education (Odimegwu, 2005).

To be empowered aright, students must be educated aright; sound and qualitative education must seek not only to impart knowledge but alsosound moral formation and character building. This is in line with Nosike’s (2010) contention that “we must prepare our people to be good and productive/responsible citizens with relevant knowledge and with the right values and orientation. This is actually the missing link in our educational system which is not rooted or anchored on sound religious/moral formation. Functional education helps learners to develop according to their unique needs and potentials overcoming handicaps and achieving greater social equality and status if the individuals are responsible/disciplined.

Education as a discipline poses the following pertinent questions to the society. What do we educate? Why do we educate? How do we educate? and who do we educate? The above questions according to Ajili and Anyanwa (2006) deal with the following: V

What? Content	Educational Curriculum
Why? Reason	Educational Philosophy
How? Method	Educational Methodology
Who? Child	Educational Psychology.

The analysis of the questions presupposes that education curriculum should be change-driven and solution based; educational philosophy should emphasize self reliance, effective citizenship, national consciousness/unity and good ambassadorship; educational methodology should be learner centered and learner friendly while educational psychology should be responsive to



learners' individual differences in order to appreciate the vast differences in their learning potentials. Education therefore as a socializing agent is designed to equip the students formally or informally with requisite knowledge, skills, competences, positive attitude/mindsets, The acceptable ethics, ethos, values, norms and other desirable societal attributes that would make them active/functional and responsible citizens enabling them to impact positively/meaningfully on the society. Education if rooted in religious/acceptable societal norms and values becomes a veritable tool of transformation and reforms because it will not only engender employment opportunities but also empower the youths to shun drug related problems and their associated criminal tendencies.

The above views have been lucidly articulated summarized by one of the scholars when he stated that sound educational programmes transform individuals from being ignorant to highly knowledgeable, from being crude/immature to civilized and emotionally stable with the right values and orientation (Odimegwu, 2005). Education that is perceived as the "united concern of people for the right upbringing of children and the improvement of the national life (Nduka, 2004). It is also a process by which every society attempts to preserve and upgrade the accumulated knowledge, skills and attitudes in its cultural setting and heritage in order to foster continuously the well being of mankind and guarantee its survival (Nwagu, 1976).

Essentially, competitive/functional education equips learners with acceptable norms/values, requisite lifelong skills, knowledge, positive mindset and other desirable attributes that would help them to be useful to themselves and to the society. It is therefore a great instrument which liberates the recipient from the shackles of poverty and ignorance as well as facilitates the socialization process and inculcation, of virtues and worthwhile values aimed at making them useful, responsible and disciplined members of the society.

## **Youth**

The term 'youth' describes those between 15 and 24 years while 'adolescent' describes those between 15 and 19 years. This bracket (15 and 24) is the one adopted by the United Nations to describe the 'youth'. The term 'young people' can refer to either 'youth' or 'adolescents'.



However, despite these commonly used categories, countries often differ in their distinctions between youth and adolescents. For some, ‘youth’ can include people, up to 25 or 35. But the majority of world nations follow the classification adopted by the U.N., that is, the youth refers to that portion of the world population within the age brackets of 15 and 24.

According to the Federal Government of Nigeria Youth Policy youth is defined as those between 16 and 30 years old and constitute over 60% of the entire population (Omesuh, 1988). Thus by numerical strength, the youth in themselves being larger than any other group in Nigeria deserves central focus. Whichever is the case, ‘youth’ is accepted by all to be a transition stage between childhood and adulthood. It is a very challenging period when many significant events occur in one’s life and many decisions taken that may impact on the person for life. The world youth between the ages of 15 and 24 is approximately 1.1 billion. These constitute 18% of world population. Youth and children together including those aged 24 and younger, form 40% of the world population. (Ngwoke 2006).

While the youth constitute 41% of the world’s unemployed people, 133 million youths in the world are illiterates. The youth manifests many diverse characteristics, some positive others negative. On the other hand, youth is daring, full of energy and vigor; youth is inquisitive and full of initiatives, enterprising and exuberant; youth is buoyant and full of hopes; youth is self-sacrificing and spending. Youth is full of dreams, beautiful initiatives and hopes. Youth never thinks of the possibility of failure (Ngwoke, 2006). On the other hand, youth is carefree, restive and reckless; youth lacks patience and tact; youth day-dreams a lot and builds magnificent castles in the air. The above characteristics add up to make youth a problem requiring that their youthful exuberance/energies and potentials be profitably developed, harnessed and channeled positively for their own good and that of the society.

## **Drug**

Drugs have been variously defined by many experts and health organizations. Oshodin (2004) described drugs as chemical substances that affect the function of human beings and which are used in treating, preventing diseases. Drugs affect psychological or behavioural functions and



lead to varying degrees of dependence or addiction. Emafo (1990) defined drug as any substance in pharmaceutical product that is used to modify or explore physiological system or pathological states for the recipient. According to World Health Organization (1994) drugs are substances which when introduced into a living organism can modify the state of equilibrium. In the same vein, the United Nations International Drug Control Programme (UNDCP) defined drug as substances which when taken in their natural or synthetic forms affect the organism by altering its mood or behaviour. Drugs are substances which when introduced into the body will alter the normal biological and psychological functioning of the body especially the central nervous system (ES Candon & Galvez, 2006).

Olatunde (1979) intimated that over 350 thousand substances have been employed as drugs and about one thousand are in regular use. The term 'drug' in general includes all substances that can alter brain functions and create dependence. Drugs are therefore chemicals; different drugs because of their chemical structures/composition can affect the body in different ways. Notably, drug can enter the body through chewing, inhaling, smoking, drinking, rubbing on the skin, injection or oral ingestion. Drawing from the views of Ekpenyong (2012), drug is any product other than food or water that affects the way people feel, think, see and behave. It is a substance that due to its chemical nature affects physical and emotional functioning.

From the foregoing therefore, drugs are conceptualized as any chemical substance other than food which when taken can alter the psychological state of an individual. They are supposed to be used mainly for the prevention, treatment and alleviation of diseases. People, however, indulge in certain drugs because of the effects of such drugs on their moods/mind (Oshidin, 2004). Hence, drugs can be licit (legal) or illicit (illegal). Illicit drugs according to Oshidin (2004) are those that are safe, effective and administered under the direction of a physician or any member of the health team for medical purpose only. Their abuse results in maladjusted behaviour, possible impairment of judgment among others. There is usually emotional and physical dependence.



---

## **Drug Abuse**

Drug abuse is defined as the use of drugs for non-medical purposes. Drug abuse is an intense desire to use increasing amounts of a particular 'substance or substances to the exclusion of other activities. Ibeagha and Ibeagha (2011) described drug abuse as the use of illicit drugs or the abuse of prescription or over-the-counter drugs for purposes other than those for which they are intended. It refers to the misuse of any psychotropic substances resulting in changes in bodily functions, thus affecting the individual socially, psychologically, cognitively or physically. Social effects may be reflected in an individual's tendency to engage in conflicts with friends, teachers and others in positions of authority; cognitive effects can be seen in the individual's lack of concentration on academic work and memory loss (Eyesuck, 2002). UNICEF and the World Health Organisation (2006) defined drug abuse as the self-administration of any drug in a manner that deviates from approved medical or socially acceptable patterns within a given culture. Drug abuse among students is, however, dominated by the use of these legal drugs and substance. Illegal drugs refer to the substances deemed harmful to the mental and physical well being of individuals by the government who seeks to control or discourage their consumption by law. Among the illegal drugs commonly used by students are cannabis, ecstasy, heroine, mandrax and lysergic acid diethylamide (NAFDAC, 2014). Prescription and over the counter drugs are abused when taken without the specified medical condition and or proper prescription. Some of these drugs can be mood elevators, pain killers or antidepressants. Prescription drugs include pain killers with codeine, phenobarbitone, valium, piriton sleep control drugs. A study by Rew (2005), found that these psychoactive substances can produce feelings of surplus energy, euphoria, stimulation, depression, relaxation, hallucinations, a temporary feeling of well being, drowsiness and sleepiness. Their misuse often leads to physical or physiological addiction.

## **Drug Addiction**

Drug Addiction is a complex disorder characterized by compulsive drug use. While each drug produces different physical effects, all abused substance, share one thing in common; repeated use can affect the way the brain looks and functions. (Robsin et al, 2014). Drug addiction involves compulsively seeking to use a substance regardless of the potentially negative social,





psychological and physical consequences. Certain drugs such as narcotics and cocaine are more likely to cause physical dependence than other drugs (Mayo, 2006). National Institute on Drug Abuse (NIDA) 2008 stated that addiction is a complex brain disease characterized by compulsive, at times uncontrollable, drug craving, seeking and use that persist despite potentially devastating consequences: Kobiowu (2006) described drug addiction as the inability of a person to control his use of a substance/drug. He argued that for an addict, drug use is more than a habit, his desire for the drug also involves physical dependence, and that is, an addict suffers painful withdrawal illness if he stops the use of the drug. Bozarth (2001) viewed addiction as a behavioural pattern of compulsive drug use characterized by overwhelming involvement with the use of a drug.

According to Afolayan and Afolayan (2010) most therapists today believe that an addict is diseased and cannot control his or her drug use anymore than a cancer victim can control the growth of a tumor. They advised that addicts should not be absolved of their responsibilities by convincing them that they have a permanent -disease that can be managed but can never be cured. Notably addiction is a chronic, often relapsing' brain disease that causes compulsive drug seeking and use, despite harmful consequences to the addicted individual and to those around him or her, however, just like other chronic, relapsing diseases, such as diabetes, asthma, or heart disease, drug addiction can be managed successfully.

Vulnerability to addiction, however, differs from person to person. Studies showed that genes, mental health, family and social environment all play a role in addiction. Hence risk factors that increase one's vulnerability include:

- Family history of addiction
- Abuse, neglect and other traumatic experiences in childhood.
- Mental disorders such as depression and anxiety.
- Early use of drugs



- Method of administration: smoking or injecting a drug may increase its addictive potential. (Mickey, 2004; National Drug intelligence centre, 2011 and Ibeagha, 2007).

### **Theoretical Underpinnings of Drug Abuse and Addiction**

Theories are a useful set of logical related concepts for explaining the occurrence of phenomena in both physical and social sciences. Theory therefore provides the intellectual, road map required for the explanations, analysis, interpretation, and predictions of social phenomena. In McAuliffe (2000) view, psychological theories encompass reinforcement and personality theories. Positive reinforcement occurs when an individual receives a pleasurable sensation and because of this, is motivated to repeat what caused it. The pleasurable mechanism may give rise to a strong fixation or repetitive behaviour (Ejorot, 1980). With respect to drug use, this means that being in a state of euphoria is pleasurable and what is pleasurable tends to be repeated. McAuliffe and Gordon (1980) noted that the continued use of all drugs that stimulate euphoria is caused by their extremely potent reinforcement effects. Negative reinforcement occurs when an individual does something to seek relief or to avoid pain/discomfort, thereby being rewarded/motivated to do whatever it was that achieved a relief or alleviated the pain. Hence when an individual who is physically dependent on a particular drug undergoes painful withdrawal symptoms upon discontinuing the use of that drug and takes a dose to alleviate withdrawal distress, he/she will experience relief with the termination of, the pain. Such an experience will motivate the addict to do whatever has to be done to obliterate the painful sensations associated with withdrawal. The theory emphasizing the mechanism of negative reinforcement in drug abuse is largely confined to drugs that produce physical dependence especially the opiates.

The inadequate personality theorists contend that drug abusers/addicts find drugs appealing because they use drugs as an escape from reality, as a means of retreating into euphoric bliss to avoid life's problems. Ausubel, (1980) pointed out that Euphoria is adaptive for an immature individual who lacks responsibility, a sense of independence and the ability to defer hedonistic gratification for the sake of achieving long-range goals. Wurmser, (1980) intimated that the more inadequate the personality, the greater the likelihood of becoming highly involved with drug use and the more that use becomes abuse and eventually addiction. In fact, for the weak, drug abuse is



a kind of crutch; for the strong, experimentation leads to abstention not abuse. Drug abuse therefore is an adaptation or a defense mechanism, a means of obliterating feeling of inferiority complex. The above theories therefore provide valuable insights why people become entangled in drug abuse and addiction.

### **Drug Abuse/Addiction: Global Trends/Challenges**

Undoubtedly, drug abuse/addiction has become a national and international problem, its multi-dimensionality pervasively affecting every society and all sectors of the economy either directly or indirectly. Roxainne (2013) noted that drug abuse is a common problem that plagues all ethnic groups and social classes worldwide. For instance, statistics on drug abuse in England include a tenfold increase in the use of amphetamines, Cocaine, and (LSD) lysergic — acid — diethylamide (a powerful drug that causes hallucinations) in individuals aged 50 to 64 years. In the United States, more than 38 million adults binge drink on average four times per month and consume an average of eight drinks at a sitting. He noted that in 2009, nearly 9% of Americans 12 years of age and older, an estimated 22.6 million people reported using an illicit drug in the month prior to being interviewed. According to the National Survey on Drug Use and Health, 21.6 million Americans over the age of 11 required professional treatment for substance abuse in 2011. out of this number 23 million; ‘just over 10% actually received treatment at a facility dedicated to treating addiction, what happens to the overwhelming majority of 90%, you guess is as good as mine. Estimates of the total overall costs of substance abuse in the United States including, productivity, health and crime related costs exceed \$600 billion annually. This includes approximately \$193 billion for illicit drugs (National Drug intelligence centre, 2011:20), \$193 billion for tobacco (Centers for Disease control and Prevention, 2004), and \$235 billion for alcohol (Rehm, et al, 2009). In Nigeria, a visit to our rehabilitation centres will reveal the devastating effects of drug abuse and addiction on the youths who have been entangled in the web of this destructive act (Falobi, 2012). He noted that government in response to the challenge committed huge sums of money for detoxification and preventive purposes.

At this juncture, it is worthy of note that drug abuse by students in Western countries is assuming an alarming dimension (Portner, 1998). The United States, one of the world’s largest markets



and a country that sets standards for many other countries, has experienced a notable recent increase in marijuana use. This actually has a negative impact on youths from other countries in terms of drug use. Many American films and magazines with young audiences sensationalize drug use. This portrayal of drugs can be highly deceiving, making embrace university undergraduates, increased significantly in the United state of America in the late 60s and 70s; little was known about hard drugs and Their usage in Nigerian then.

Thus, it has been ascertained that drug abuse and addiction have obvious negative implications on individuals, families and the entire society. As shocking as these numbers are, they do not fully describe the breadth of destructive public health and safety implications of drug abuse and addiction such as family disintegration, loss of employment, failure in school, domestic violence and child abuse (Retm et al 2009).

### **Drug Abuse/Addiction and Educational Implications among youths**

Fundamentally, education is meant to help individuals to be well informed about life and life threatening vices such as drug abuse and addiction. Students are taught basic but essential knowledge about health and the serious health implications of abusing drugs, alcohol or using illicit drugs. Ironically, education believed to be the principal means of preventing drug abuse/addiction has been greatly impoverished by drug abuse/addiction. The devastating effects of drug abuse and addiction on education are unfathomable.

Unarguably, drug abuse has a negative impact on the education of both the secondary school students and undergraduates. It has thus become a national concern in Nigeria because of its negative impact on education and future leadership, innovations and human resources. Secondary school students are particularly at risk given that they are their formative years of education, career development, social skills and identity formation (Ekpenyong, 2012). Reports from education officials in Bayelsa state noted that students using alcohol and nicotine in particular at a rate that is causing concern. In spite of concerted efforts by National Agency for food and Drug Administration and control (NAFDAC) and other organisation's — based interventions, drug abuse is still on the increase with over 40% of students abusing various types



of drugs. Drug abuse appears to be a well-entrenched behaviour among secondary school students.

Drugs can affect a student's concentration and thus interest in school and extracurricular activities. This leads to increased absenteeism and drop outs. Most psychoactive drugs affect the decision making process of students, their creative thinking and the development of necessary lifelong and social skills. Drug also interfere with an individual's awareness of their unique potentials and thus their interest in their career development (Lamond, 2014). Notably, Educational level has been found to have an impact on the risk of drug or 'alcohol abuse. For instance, a study conducted on 30,000 men and women aged 26 — 39 'years showed that those with the lowest level of schooling were most frequently heavy smokers, heavy drinkers and most physically inactive (Copenhagin, 2004). Similarly, it has been reported that nearly half of all patients in treatment for drug or alcohol abuse never went to school or only completed primary school. These results suggest that educational level may have some influence on those who would abuse alcohol and drugs but it is not however, a definite indicator. This is because the majority of people who do not have high levels of education do not abuse drugs and alcohol (Deykin, Levy and Wells, 2007:179- 182). Their findings are suggestive that those with high educational attainments do not abuse drugs and alcohol. Their contention however, is invalidated by the fact binge drinking is a chronic problem of universities and other institutions of higher learning. Youths often believe that they need to participate in binge drinking to fit in; bars, clubs and social groups often encourage this dangerous misconduct by organizing or offering discounts on drinks, organizing weekend long parties or events that encourage excessive consumption; peer pressure, low self esteem and the need to connect with friends all contribute to this dangerous activity engaged in by undergraduates (Smith and Saison, 2010). They noted that, statistically drinking is more 'likely to occur within college or university setting. In this instance, the higher level of education influences the participation in harmful and high risk activities. Data revealed that college or University students are also more likely to drink heavily than their peers who are not attending higher education. The study conducted by Kobiowu (2006) and Falobi (2012) showed that academic pursuit of those undergraduates who engaged in drug misuse is jeopardized and substantially hampered. Their findings were in line with that (Taskin 2014) who



found that marijuanalike most hard drugs, altered time sense, decreased auditory discrimination, results in difficulty in concentration and brings about impairment of ability in psychometric tests especially those that are related to the manipulation of numbers.

Drug related problems have resulted in serious moral decadence with obvious serious negative impacts on the educational programmes and careers of the victims. The alarming rate of mental misbehaviour among youths/students and undue irrational acts by them are all fallouts of drug abuse/addictions. Notably, children from substance — abusing background are considered “At Risk” because they have the potential to be referred for special service due to some types of learning impairment. The risk associated with these children relates to possible cognitive damage, possible developmental delays from damage incurred in uterus or incurred due to home environment. The need for special services is applicable to students who have been left with severe cognitive impairments as a result of exposure to drugs. From the foregoing therefore, the irreparable damage of drug abuse/addiction on education and victims’ careers/vocation is unquantifiable

### **Drug Abuse/Addiction and Health Implications**

The maxim that health is wealth can never be contested and underestimated because robust health is foundational/fundamental to any meaningful life endeavour. Dishearteningly, the virtue implicit in this dictum has been rubbished by drug abuse/addiction because of non recognition by the abusers/addicts. Hence health problems consequent on drug abuse/addiction are the bane of many families worldwide.

The negative impacts of health problems are pervasive and multi dimensional. Notably, health problems impair family life and productive employment, diminish the quality of life and may threaten survival. The most widely used addictive substances — alcohol and tobacco are harmful with extensive damage to the individual, family and the “community. Tobacco and alcohol consumption account for nearly 5 million deaths annually ‘world wide. Deaths as a result of drug abuse are a major source of concern to government globally. The calamitous effects of drug abuse/addiction on health is pervasive. In the words of Ohara (2009) the impact of drug abuse



and dependence can be far-reaching, affecting almost every organ in the human body. He stated that drug abuse/addiction can:

- Weaken the immune system, increasing susceptibility to infections.
- Cause cardiovascular conditions ranging from abnormal heart rate to heart attacks. Injected drugs can also lead to collapsed veins and infections of the blood vessels and heart valves.
- Cause the liver to have to work harder, possibly causing significant damage or liver failure.
- Cause seizures, stroke and widespread brain damage that can impact on all aspects of daily life by causing problems with memory, attention and decision-making,
- Inching sustained mental confusion and permanent brain damage.
- Produce global body changes such as breast development in men, dramatic fluctuations in appetite and increases in body temperature, which may impact a variety of health condition.

In his submission XPerkin (2002) highlighted the following as behavioural/Psychological related problems associated with drug abuse and addiction: Paranoia, Aggressiveness, hallucinations, Addiction, Impaired Judgment, Impulsiveness, Loss of Self-Control, Prolonged loss of appetite, increased body temperature, Insomnia. Thus, the tsunamic effects of drug related problems on all spheres of life especially health is unparalleled and distressing.

### **Causes and Consequences of Drug Abuse/Abduction**

Drug abuse/addiction, like the majority of other mental-health problems have no single cause. However, there are a number of “risk factors” such as biological, psychological, genetic and social factors that can increase a person’s likelihood of developing a chemical- abuse or chemical-dependence disorder (Okwu, 2006:96). Observably, drug related problems emanate from poor parenting, lack of parental care, family conflicts broken homes peer pressure, desire to connect with friends among others. Supporting the above view, Iranbiya (2009) opined that the cause of drug abuse could be family system, communal or psychological factors. According to him, the psychological factors include — frustration, imitation, personality traits, desires to



improve social relation while family system and community factors are marital problems, stress in the family, peer influence, academic difficulties, desire to enhance performance in sports, illiteracy among others. According to counseling directory (2009), many reasons are attributed to why individuals abuse drugs and these vary from person to person. Hence the following are adduced to be the reasons why people become drug abusers/addicts. Escapism, Peer pressure/Desire to connect with friends, indeed curiosity to experiment, Enjoyment of the effects and easy access to socially acceptable drugs such as alcohol and tobacco (Bell,1999).

Studies by Okok(2008), oduaran (2008)merrick(2016) exhibit a plethora of purposes for which students use drugs. The list includes curiosity, boldness, friends — do it attitude, enjoyment of social gathering, academic pressure, sound sleep, sexual — prowess and performance in sports. In their submission, Hamilton, Noah and Adlaf, (2009)‘Contended that children and adolescents from low social economic status (SES) have a higher preponderance of substance use and are at a higher risk for substance abuse.

Sussman et al (2008) opined that the adolescents may be subject to psycho pathology and as a result use substances to relieve the stress caused by the environment and the consequential psychopathology. Their contentions/analysis seem reasonable and rational because even in Enugu Urban area, areas that are inhabited by people of low social economic status such as “Ogwuagor” in Abakpa “Ama-Hausa” in Ogui Urban jungle are known to record the highest number of school droops who indulge in all sorts of social vices. Such areas are notorious for breeding/incubating and nurturing deviants, most of whom indulge in smoking, “Igbo”, Indian hemp, excessive drinking of alcohol — “Ogogoro” among others. However, the above submission does not completely exonerate those from higher social class of the vice. Admittedly, children/adolescents from higher social economic status are not “Saints” but the extent of their indulgence in such vices is minimal compared to those from impoverished family background most of whom are devoid of parental care/love, good nourishment and other things that make life worthwhile.

Poor parenting contributes maximally to the vice because investigation showed that some of these youths were either lured into such misdeed as a result of neglect by parents or in the name





of fending for themselves (Falobi, 2012). Also, peer pressure is another risk factor claimed to be responsible for drug abuse/addiction. Thus, Sussman, Dent and Leu, (2000) observed that peer pressures and solicitations from peer compel youth and adolescents to indulge in such anti socialbehaviour. Family background history also contributes to drug abuse/addiction.Cultural factors also play a role in substance use and misuse; school age children that are raised in a culture where the use of substance is accepted and celebrated, have higher rates of substance use and abuse thantheir contemporaries who reside in a society where such vice contravenes societal norms/values and is therefore regarded as a taboo (Fisher and Harrison, 2009 :20).

According to Bell 2017 the causes of drug abuse among students are not too different from those for adults. He noted that drug abuse has many causes viz: cultural, social, economic, psychological and family pathology. These causes includedrug abuse through ignorance; deliberate drug abuse, drug abuse for pleasure, drug' abuse from curiosity; incorrect drug dosage; drug habit and addiction; school or work environment; personal feeling of inadequacy and membership of a group/peer pressure. Whatever may be the cause, drug abuse and addiction have unimaginable consequences for the victims:

### **Consequences of Drug Abuse/Addiction**

The harmful effects of drug abuse/addiction cannot be overemphasized. The consequences are multi-dimensional, unfathomable and unquantifiable. Notably, drug abuse/addiction affects all facets/aspects of lifehealth, education, social cum family life. Health wise, it is attributed to svarious forms of health impairments, mental sickness, mala-adjustments/behavioural disorders and in extreme cases death. Socially, it has resulted in juvenile delinquency, armed robbery, cultism activities, rape, kidnapping, broken homes, divorces, poor parenting and other social related vices. Academically, many school dropouts are fallout of drug abuse/addiction. The dwindling standard of education and the poor performance recorded yearly in West African Senior Secondary Examination(WASSE), are partly attributed to drug abuse/addiction..

Supporting the above contention Okwu (2006) lamented that social problems resulting from the actions of maladjusted people who were abnormal because of mental deficiency, mental disorder,



lack of education or incomplete socialization are overwhelming. Reports from the United Nations and other sources highlighted increase in drug abuse and its harmful consequences in most parts of the world. Substance-related deaths have been estimated at nearly, 5 million annually from alcohol and tobacco (Cercone, 1994). Cocaine and other stimulants have the potential to induce compulsive use, disrupting work and family life. Drug abusers have more absenteeism, accidents on the job, medical claims and lost productivity than non-users (UNDCP, 1995). Drug habit affects individual's self concept thereby ruining him/her academically, physically and socially (Luow, 2001:21). Low self esteem can lead to a detrimental redefinition of self concept and this in turn can lead the person to indulge in escapist behaviour such as drug abuse and addiction. A study by Merki (1993:99) showed that when the students are feeling bad about themselves or are feeling unworthy, unloved or rejected, they turn to drugs. Drug abuse also affects the brain, resulting in major decline in its function thereby affecting students' concentration and thus interest in school and extracurricular activities. This leads to increased absenteeism and drop outs. Most psychoactive drugs affect decision making process of students, their creative thinking and the development of necessities and social skills. Drugs also interfere with an individual's awareness of their unique potential and thus their interest in their career development (Louw, 2000:21). Children inflicted with foetal Alcohol syndrome serves as examples of the potential risks involved with substance abuse during pregnancy.

The consequence of drug abuse / addiction are lucidly articulated thus:

- Illicit drug users make over 527,000 costly emergency room visits each year for drug related problems.
- One dollar out of every \$14 of the nation's health care bill is spent to treat those suffering from smoking-related illnesses.
- Drug offenders account for more than one-third of the growth in the state prison population and more than 80 percent of the increase in the number of federal prison inmates since 1985.



- More than 75 percent of domestic violence victims report that their assailant had been drinking or using illicit drugs at the time of the incident (Tullis, 2013).

In his submission, Badru (2012) explained that it was imperative to tackle head-on the prevalence of drug abuse because the phenomenon was fast assuming a very frightening V 'dimension in our society. He lamented that the consequence is enormous if one considers the devastating and very damaging consequences on the user and the family.

Notably, more deaths, illnesses and disabilities stem from substance abuse than from any other, preventable health condition. Today, one in four deaths is attributable to illicit drug use. People who live with substance dependence have a higher risk of all bad outcomes including unintentional injuries, accidents, risk of domestic violence, medical problems, and death. All in all, the consequences of drug abuse and addiction are unimaginable.

### **Strategies to Combating Drug Abuse and Addiction**

Different strategies have been identified to combat the drug abuse and addiction. Prominent among them are discussed below

#### **Guidance/Counseling**

The imperative of guidance/counseling especially during the formative years/period of youths/students cannot be overemphasized as it enables student/youths develop deeper/better insights into their career/vocation related issues enabling them to toe the right career paths that would engage and sustain their interests enabling them contribute positively to the society (Ibeagha, 2007).. Fundamentally, guidance/counseling programme as an integral part of school curriculum should be meticulously articulated and effectiveness implemented to achieve desired reforms/transformation in students. Hence guidance and counseling should aim at helping youth/students achieve total adjustments academically socially and psychologically so as to effectively key into their careers/vocations and make a mark in the society. To this end, guidance/counseling programme should be designed to nurture and imbue youth/students with



the right family/societal values, norms and ethos that will make them responsible students/citizens and later patriotic and good ambassadors of the nation.

### **Good Parenting Practice**

Also Parents should therefore devote/spend quality time with their children guiding and counseling them on life/career related affairs; and more importantly to enable parents gain valuable insights into their children's perceptions of life and advise/counsel them accordingly as Children devoid of parental care/love and doting may end up becoming drug abusers and addicts (Smith and Saison, 2010).

### **Sound Religious Formation in Educational System**

Also, educational Institutions should ensure that their curriculum is rooted on sound religious formation to inculcate in their students and graduates acceptable societal ethics and good morals necessary for them to forge ahead in their life related efforts aspirations. Educational institutions should therefore aim at bequeathing their students with learning that is total and totalizing. That is, all round development — cognitive psychomotor and affective skills. On this note, religious seminars/film show should be regularly organized for adolescent youths to keep driving home the dangers of drug abuse/addiction.

### **Health Counseling and Guidance**

Although, drug abuse and addiction have devastating effects on the abusers'/addicts' total life/careers, there are treatment/ interventions that would help to heal the body, mind and spirit of the victims so that they start living a normal life once more. There are all sort of therapeutic programs to help the victims live drug free life and beat their addiction by, learning lifelong coping skills to help them resist cravings and stay drug free (Ekennia, 2002). Addiction is treatable but the treatment is a gradual multi-faceted process that involves healing the body, mind and spirit. With the support of compassionate addiction specialists, Victims can overcome the barriers to recovery and build a clean, health life. The specialists are uniquely equipped to



provide requisite rehab services to help the victims build the drug free life they are looking forward to (Gossop, 2003).

## **Conclusion**

Drug abuse has dealt devastating blow on people of all age brackets worldwide. It has also infiltrated all the strata of the society in both the developed and developing V countries of the world. Drug abuse/addiction is a serious canker-worm that has eaten deep into the Fabrics of every society resulting in various forms of health and educational problems as well as social related vices that make life worthless. Nevertheless, it can still be effectively combated through good parenting, counseling by the school authority, religious leaders and community heads. Youths/students should be 'closely monitored to determine when they are deviating from the right family/societal values and norms and more importantly to identify any abnormal behavioural tendencies early enough for timely intervention and Psychotherapy.

## **Recommendation**

Based on the above, multi-dimensional strategies should be adopted to address these vexed

- issues of drug abuse and addiction so as to salvage our youth's/citizens and to strategically reposition the affected/dysfunctional institutions for greater tomorrow:

(1) Effective treatment/intervention requires concerted efforts of the parents/families, school authority and health providers (Psychiatrists, Psychologists and other mental health professionals).

(2) Prevention or reduction in the rate of drug abuse and addiction can be achieved through effective guidance and counseling, sensitization of the youths on the calamitous effects of drug on their health/careers.

(3) Educational Curriculum should be designed to be functional, industry driven and solution based so as to awaken motivate youths'/students' interests, engage/sustain their interests/attention thereby channeling their youthful energies/potentials positively.



---

(4) Parents should as much as possible not allow their marital problems to ruin their children's life/career. They should be relating effectively with their children to give them sense of belonging/love and to be able to take timely interventions if any undesirable relationship or abnormal behaviour is observed.

(5) Schools should be handed over to the original owners — the mission, in order to effectively combat the issue of drug abuse/addiction, its related vices and the consequent unparalleled moral decadence in the entire system.



---

## References

- Adepoju, T. (2004), Philosophical foundation of education and education policies in Nigeria. Benin: mark part publication.
- Afolayan, J.A. &Afolayan A.M. (2001), “Drug Addiction and its Academic Implications among Secondary School Students in Ilorin South Local Government of Kwara - State, Nigeria” Wilolud Journal 5(2), 2010 <http://www.wiloludjournal.com>
- Ajili and Anyanwu (2006), Teach education in Nigeria: An introduction, Enugu HRV Publishers.
- American Annals (2009) Annals of American History 1994-2009 Encyclopedia Britannica inc.
- Ausubel N. (2014)Self esteem Theory of Drug Abuse. Theories on Drug Abuse. Washington D.C. Research Monograph Series.
- Bejorol, R (2015) Theories of Drug Abuse, Journal of Drug Education 4(5). Bell, A.S. (440) “brug Addiction” Bulletin on narcotics 22(2).
- Centers for Disease Control and Prevention Smoking-Attribute Morality, years of potential life lost and productivity losses United States Morbidity and Mortality weekly Report.
- Cercone, J. (1994:47), Alocohol-Related Problems as an obstacle to the Development of Human Capital: Issues and Policy Options, World Bank Technical Paper No. 219 Washington DC.
- Cheryl, R. &Gert .R. (2003), Introduction to Psychological Assesment, Capetown: OxfordUniversity Press. -
- Copenhagen L. (1995:31-35), The Social Impact of Drug Abuse, Medical Journal 4(2).
- Counselling Directory (2010), Drug Abuse Counselling [www.counsellingdirectory.or.ukldrug.htm](http://www.counsellingdirectory.or.ukldrug.htm) l
- Dental Dictionary (2004) Moshys’ Dental Dictionary. Elsevier.Inc.



Dçykin E.Y. Levy, J.C & Wells, V. (2007). Adolescent depression alcohol, and drug abuse. V V  
J Public health 79:179 — 182.

Diclemente, C. (2006), *Addiction and change* New York: Guiliford Press. Eason, W (2006),  
*Understanding Teenage Drug Abuse: Postgraduate Medicine*.

Ejiofor, P. (2003), *Religion and Morals: A Convocation Lecture*, Madonna University, Okija.

Ejiofor, P. (2003), *Religion and Morals: A Convocation Lecture*, Madonna University, Okij a.

Ekennia, C. C. (2002). Self control and multi component therapies haigarette smoking cessation  
among Nigerian soldiers.

Ekpenyong S. N. (2012), *Drug Abuse in Nigerian Schools: A study of selected Secondary  
Institutions in Bayelsa State, South-South, Nigeria*, *International Journal of Scientfle  
Research in Education* 5(3).

Enyi, G.S. (2004), *Teacher Education in Nigeria*: Enugu: J.J.C. Publishers. Escandon, K.  
&Gelvez, c. (2006). *Free from Addictions*. Madrid: Editorial Safeliz.

Falobi, F. (2012), *Curbing the menace of Socsial Vices in Lagos Schools* “Daily Independent,  
December 14.

Fisher, G.L. & Harrison, T.C. (2009), *substance abuse: information for school Counsellors,  
social workers, therapists and counselors*. Boston, MA: Allyn an Bacon.

Friestad, C., Pirkis, J. Beihi. M. Irwin C. (2003), *Socioeconomic patterning of smoking, sedentary  
lifestyle and overweight status among adolescents in Norway and the United States*.  
*Journal ofAdolescent Health* 22(2).

Fromme, K, Katz, 6 C. & Rivet, K ( ), *Outcome expectances and risk-taking behaviour, cognitive  
Therapy and Research* 21(2).





- Gabel, S Ställings, M.C. Young, S.C. Schmitz, S. Crowley, T.J. & Fuller, Dr. W. (1998), Family variables in substance-misusing male adolescents: The Implication of Maternal disorder. *American Journal of Drug and Alcohol Abuse* 24(2).
- Goodman. E. & Huang, B. (2002), Socio-economic Status, depressive Symptoms and adolescents Substance abuse. *Archives of pediatric and Adolescent Medicine*, .156 (1).
- Gossop, M (2003), *Drug Addiction and its Treatment*, New Zealand: Oxford University Press.
- Hamliton, H, Noah, S & Adlaf. E. (2009), Perceives Financial Status, health and maladjustments in adolescence. *Social Science & Medical Journal* 5(1).
- Haskins, N.H (2014) *The School Counsellor's Role with students At Risk for Substance Abuse*. *Vistas* 10(1).
- Hoffmann, J. p. & Cerbone, F.G. (2002), Parental Substance use disorder and the risk of P adolescent drug abuse: An event history analysis. *Drug & Alcohol Dependence* 66 (4).
- Ibeagha, E (2007), *The role of Health Counselling in drug Abuse*: Unpublished.
- Ibeagha, G. 3. & Ibeagha, N. E. (2011), *Health Counselling: A Panacea To Relieving Drug Abusers*, *The Nigerian Journal of Research and Production* Volume 18 (1).
- Igbokwe, J.M. (1997) "Drug Abuse in a Depressed Economy", A lectLe presented during the physician week held of Abakahki, Nigeria, October, 24.
- 'franbiya, M. I. (2009), *Drug Problem: the law and Nigerian Society*, Sunday Trust Magaiine. Fab Educational Books los.
- Kaplan, T. (2015) "The Psychology and Personality of Addict", *Adolescence* 12(1).
- Kilpatrick, D. G. Aciero, R, Saunders, B, Resnick, H.S. Best C.L. & Schnurr, p.p (2000), Risk Factors for adolescent substance abuse and dependence: Data from a national sample: *Journal of consulting & Clinical Psychology* 68, (5).



Kobiowu, S.V. (2006), The Social and Academic Implications of Drug Abuse among undergraduates: A case of the Obafemi Awolowo University, Ile-Ife, Nigeria. *International Journal of Psychosocial Rehabilitation*, 11(1).

La Mond, J. (2003), *Illegal Drugs in nine countries: Socioeconomic and Political Consequences*. Draft report prepared for UNRISD. at Geneva and the United Nations University at Tokyo, December 23.

Mayo, A (2005), The nature and pattern of problems for secondary school counselling. *The Counsellors* 1(5).

McAuliffe, S and Gordon M. (1980) *The Natural History of Drug Abuse. Theories on drug abuse*. Washington D.C.

Merrick, I. (-8), Addicted mothers and their children: research results from Denmark, *International Journal of Rehabilitation* 8(1).

Mickey, C. S. (2004), *Pharmacy, Drugs and Medical care*. Mississippi: University Press.

Miller, B. 3. (1974), *Good Health: Personal and Community health*, Philadelphia: Saunders Mirin.

Miller, R. L. (2002), *The Encyclopedia of Addictive Drugs*. West Poft Greenwood Press.

“NAFDAC (2004), *A handbook on Prevention of Drugs substance Abuse in Nigeria*. NAFDAC (2008), *Do Drugs Control your life? Know the Risks*.

National Drug Intelligence Center (2011), *The Economic Impact of Illicit Drug Use on American Society*. Washington D.C. United States Department Justice.

National Institute Drug Abuse (2000) U. S. Department of Human Services.

Ngwoke 5. (2006), *Education for your empowerment*, African Marketing Development Foundation.

O, Hara C. (2009), *Drug Addiction and Health related problems*” *Journal of Medicine* 34 (2).



Ocho, O. (1988), *The Philosophy of education in Nigeria*. Enugu tarms printing and F publishing company.

Odimegwu, E.D.B.O (2005), “Meeting the Challenges of Human Capital Development: The case of reforms in our Educational Policies and System”, 34 convocation Address Delivered by Eze F.B.O. Odimegwu.

‘Oduaran, (2008) *Psychological Guidance of the School child*. Ibaan, Evans Books.

Oko, B *Problems of Secondary Leavers careers* 2(3).

Okwu, T.O. (2006), *A Critique of Student’s vices and the Effects on Quality of Graduates of Nigerian Tertiary Institutions* *Journal of Social Science* 12(3).

Olatunde A. (1979), *Self-Medication: Benefits Precautions and Dangers*. •London: Macmillian Press Ltd.

Oshodn O.G. (2004), *Are you not Abs Guilty of Drug Abuse? Health Education and Cultural Strategies to the Rescue*.

Oto J.O. (2006), *A Critique of Students’ Vices and the Effect on Quality of Graduates of Nigeria Tertiary Institutions* *Journal of Social Sciences* 2(3).

Perkin M. (2002) “Substance Abuse related Problems as an obstacle to the Development of Human Capital, *Journal of Adolescent Health* 40 (4).

Réhm, J. Mothers, C. Popova S. Thavomcharoensap M. Teerawattananon Y and Patra J. (2009), *Global Burden of disease and injury and economic cost attributable to alcohol*, *Lancet*, 373(9682).

Reinherz, H, Giaconia R, Hauf. A, Wasserman M, & Paradis A. (2000), *General and Specific childhood risk factors for depression and drug disorders by early adulthood*. *Journal of the American Academy of childhood and Adolescent Psychiatry* 39(4).



---

Rew, L (2005), Adolescent Health, A multidisciplinary Approach to Theory Research and Intervention. California: sage Publication.

Sussman, S. Skara S, & Amos, S.L. (2008), Substance abuse among adolescents. Substance use and Misuse journal 43 (6).

Tullis, I. (2013) Illegal Drugs in Nine Countries Social & Political Consequences, Report Prepared for UNRIS at Geneva and the United Nations University at Tokyo.

Ugwuegbunam, C. N. (2005), Health Counselling Services: a gender sensitive approach Owerri: Versatile Publishers.

Wairmsen S. (1980), Theories on drug abuse. Journal of the American Medical Association 238(14).

WEINBERG, n.z. Rahdert, G, Colliver, J.D & Glantz M.D (1998), Adolescent Substance abuse: A review of the past 10 years Journal of the American Academy of child and Adolescent psychiatry 37 (4).

WHO & UNICEF (2006), Global School based health survey report Geneva..retrieved September 3, 2012 from [www.who.int/chp/gshs/UNICEF-GSHC-Report-oct-07](http://www.who.int/chp/gshs/UNICEF-GSHC-Report-oct-07)

Winger, Eoods and Hoffmann, F (2004) , a HANDBOOK ON Drugs and Alcohol Abuse, the Bio-medical Aspects, new York: oxford universitypress.