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### Psycho-Social Determinants of Substance Abuse Among Adolescents in Ondo- State, South-West, Nigeria.

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#### Abstract

The scourge of substance abuse among the youths seems to be escalating globally in recent times with the resultant increase in crimes and various antisocial behaviors that are of public health concern. Substance abuse refers to the illicit use of drugs, alcohol and tobacco with no recourse to medical prescription. However, the fact remains that substances commonly abused are generally mind altering. This study therefore investigated psycho-social determinants of substance abuse among adolescents in order to reduce the burden of psychoactive drugs in Nigeria. A descriptive research design was adopted for the study. A total sample of 500 participants between ages 14-18 years were selected through multistage sampling technique. A self-designed questionnaire was used to collect data and the data collected was analyzed using descriptive and inferential statistics. The hypotheses postulated were tested at 0.5 level of significance. The result revealed that there was significant relationship between psycho-social factors and substance abuse among adolescents. The findings also revealed that out of the three psychosocial variables reviewed (poor parenting, poor academic performance and negative peer influence), poor parenting is the best predictor of substance abuse among secondary school adolescents. It was recommended that parents should be proactive in close supervision and use of appropriate anti- drug communication strategies to prevent the onset of substance abuse among adolescents.

**Keywords:** Adolescents; Substance Abuse; Vulnerability; Illicit; Psychoactive.

#### 1.0 Introduction

Various substances (plants, roots and drugs) have been used for treatment or prevention of diseases in man or animals over the ages. The possibility of being abused or misused have always existed though the extent and characteristics however

vary from region to region. Substance abuse as a psychosocial issue in adolescence is one of the most critical issues for countries nowadays. The World Health Organization (2010) described adolescence as a critical period between ages 10-19 years of life when much new behaviors are explored some of which may include illicit drugs

experimentation. Most of these behaviors become established and may continue through adulthood. Experiences have shown that the onset of substance abuse is usually in the adolescence, a critical period of life span characterized by experimentation. Given this background, it is important to understand the psychosocial factors that influence adolescents to engage in substance abuse and the extent to which the involvement has affected the sanity of the society. Substance abuse according to the World Health Organization (WHO, 2017), refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. In Nigeria, like any other countries globally, youths are developing addiction to psycho- active substances. However, the degree of involvement in substance abuse for any adolescent varies and may be determined by the function of negative social influence that they are exposed to and their individual developmental vulnerability. These adolescents are particularly vulnerable because the area of the brain that control decision making, judgement and self-control are still developing (WHO, 2010). People abuse substances like drugs, alcohol, and tobacco for different reasons including pleasure, improved performance and vigilance, relief of depression, curbing hunger, and weight control (Tabish *et al.*, 2015). The impact of substance abuse can elicit the physiological signs of addiction, such as tolerance, withdrawal, social factors (impaired work performance, relationship dysfunction), and behavioral markers (risky use, inability to regulate use). Psychoactive drug use is responsible for more than 400 000 deaths per year worldwide while the global level of alcohol consumption in 2016 according to WHO (2019) was 6.4 L of pure alcohol per person aged 15 years. Several psychosocial factors have been associated with substance abuse. Particularly, peer pressure, media portrayal of substance-use by celebrities, lucrative advertisements, attractive packaging and expectations of joy are commonly associated with harmful use of substances by the young according to Tripodi *et al.* (2010). In general, it is widely accepted that peers, social environment, family and subjective factors play a vital role in substance abuse behaviors among the adolescents.

## 1.1 Concept of Substance Abuse

According to WHO (2020) substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. In the same vein, the National Food and Drug Administration and Control (NAFDAC, 2018) defines the term substance abuse as the excessive and persistence usage of substances without regard to medically or culturally accepted patterns to the extent that it interferes with the health and social functions of the individual.

Abdullahi (2005), in his own perspective, noted that the term substance abuse is a broad name that is not restricted to oral therapies (injections, capsule or tablets) but includes marijuana, cigarettes, alcohol as well as traditional alcoholic drinks like ogogoro, burukutu and so on. However, the fact remains that substances commonly abused are generally mind altering whether it is alcohol or drugs. These commonly abused psychoactive substances include hard drugs (marijuana, cocaine, heroin), alcohol, tobacco, amphetamines, pain killers (rophenol, tramadol) and codeine cough syrup among others while marijuana and tramadol remain the most commonly abused as noted by NDLEA (2018). Although, most substance abusers may find it seemingly blessed with a number of positive side effects of these substances, the reality is that these substances are ultimately harmful. The problem of substance abuse seems to have escalated beyond the usual characteristic profile of abusers being male adults and urban based to now include females, adolescents and those who live in rural areas. Recent observations have shown that many Nigerian youths depend on one form of substance or the other for their various daily activities- social, educational, political and moral. However, drug consumption pattern in the metropolis still differs. While smoking, drinking, and injection are common, depending on the type of drugs involved (Ibrahim, 2016), the West African Commission on Drugs (WACD, 2014) indicated that many consumers take a mixture of cannabis with alcohol (known in group language as combined). Others drink a mixture of codeine and tramadol (known in group language as Reliefine).

Other combinations which are popular among street boys include a mixture of lizard dung with lacasera and inhaling of paint and latrine. The smoking of Paw-Paw leaves and the seeds of “Zakami” also serves as a stimulant. It is debatable which of these drugs is mostly used by the youths, but the United Nations Office on Drugs and Crime (UNODC, 2012) has argued that cannabis smokers are likely to take any other drugs, especially when their chosen drug is scarce. This challenge has become a matter of grave concern to educational stakeholders, medical practitioners, sociologists, religious leaders, counsellors and parents as emphasized by Abdu-Raheem (2013). The National Drug Law Enforcement Agency (NDLEA) in 2021, collected drug use and abuse data from schools, health facilities and people arrested for drug offences. The result showed that youths (38%) constitute the high risk group for drug trafficking and abuse. Similarly, recent global trends have also indicated that the use of substance have dramatically increased to claim 15 million lives annually (WHO, 2019). Alcohol and other substance use are on the rise among the adolescents globally. Studies indicate that substance abuse behaviors generally begin during adolescence whose consequences pose important public health problems. Ahmad *et. al* (2007) found that substance abuse was negligible among 10-13 year old but reaches maximum in 16-19 years of age.

## **1.2 Psycho-Social Determinants of Substance Abuse**

Psychosocial factors are influences that affect a person psychologically or socially. It encompasses two categories of variables – psychological and social. According to Macleod and Davey (2003), psychological factors are individual level processes and meanings that influence mental states while social factors include the general factors at the level of human society concerned with social structure and social processes that impinge on the individual. The society failure currently being observed probably resulted from decline in family values system, parents not playing their roles properly. This is because parents that are supposed to orientate and

acculturate the children spend little or no time with them. In families where the youths are likely to have gone through Pro-drug socialization, the use of drugs (illicit) may be minimized. In this context, socialization may be not only to illicit drugs but also to licit drugs. The empirical finding associated with viewed that children who use drugs illicitly often come from families where one or more of the parenting figures used drugs (Abdu-Raheem, 2013).

Psycho-social factors play important roles in initiation, maintenance and escalation of substance abuse. Griffin and Botvin (2010) also opined that these factors can be divided into individual, family, school and community factors. According to them, individual factors encompass cognitive, attitudinal, personality, biological and developmental factors. Cognitive factors include a knowledge deficit regarding the risk of use and abuse, misinterpretation that substance use is normal and that many people engage in use and have less risk.

Griffin and Botvin (2010) further noted that poor self-esteem, low assertiveness, poor self-control and poor academic coping skills are psychological characteristic associated with substance abuse. In another study, Abiodun *et al.* (2014) observed that family factors which include genetic heritability, decline in family values, modelling of behaviors and attitudes, low level of family bounding and frequent family conflicts may also influence substance abuse. In another view, Michael *et al.* (2009) also identified certain psycho-social factors influencing substance abuse among adolescents. As noted by him, such factors include experimental curiosity, peer group influence, social media influence, lack of parental supervision, personality problem due to socio-economic conditions, availability of illicit drugs and the need for energy to perform or work for long hours. He further stressed that students abuse drugs in other to react to failure with mark feeling of hurt and inferiority to low frustration tolerance and to ensure their ability to play expected male and female roles.

Availability may also refer to social aspects because drugs are more available in some social groups than in others while frequent use of drugs are possibilities in families where more than one-member use drug (Boluwaji *et al.*, 2017). Furthermore, various empirical studies have also shown that environmental factors and bounding in various illicit school associations could be associated with adolescent's substance abuse. These involve association with drug using peers (cultists and confraternities) which is the immediate risk factors at schools and communities (Boluwaji *et al.*, 2017). Few studies have looked into the factors associated with initiation and maintenance of substance abuse among the youth in India (Ahmad *et al.*, 2007). The limited data indicates two things consistently. Firstly, awareness about the harmful effects of substance abuse is not sufficient to contain the substance abuse. Secondly, peer influence was consistently identified as a source of encouragement for initiation as well as maintenance of substance use. Nevertheless, peer behaviors and attitudes were found to be very influential on socially impermissible behaviors as substance abuse (Ahmed *et al.*, 2007).

### **1.3 Impact of Substance Abuse**

The impact of substance abuse according to WHO (2017) can elicit the physiological signs of addiction, such as tolerance, withdrawal, social factors (impaired work performance, relationship dysfunction), and behavioral markers such as risky use and inability to regulate use). These consequences can be devastating on adolescents' lives. They cut across psychological, social, economic, cultural, moral and health aspects of living. Many researchers have also agreed that emotional breakdown and inability to control self as a result of drug abuse are associated with inner-city crises, crime, and youth violence (Klantschnig, 2013; Origer, 1999; Origer and Cloos, 2003).

In its own view, WHO (2020) confirmed that the use of psychoactive substances can lead to dependency syndrome - a cluster of behavioral, cognitive, and physiological phenomena that

develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state. Alcohol intoxication and the use of substances like marijuana and solvents are associated with traffic and other types of injury, an increased risk of HIV infection, cognitive impairment, and mental disorders (WHO, 2016)

### **1.4 Statement of the Problem**

Despite worldwide concern and education on substance abuse, many adolescents have limited knowledge of its psycho-social risk factors. Parents and the community who are supposed to guide the adolescent morally have not been playing their roles. The National Drug Law Enforcement Agency (NDLEA) and NAFDAC have been putting up several strategies in eliminating the growing of, processing, manufacturing, selling, exporting and trafficking of hard drugs. However, the effectiveness of such strategies on substance abuse remains a subject of concern as recent statistics released from NDLEA (2021) indicates that 40 % of our under age group are already on drugs. This is becoming worrisome and a threat to social security with increasing maladaptive anti-social behaviors like violence, armed robbery, internet fraud, social miscreants (Area boys), school dropouts, delinquencies, rape and kidnapping among others. Significantly, the current costs of substance abuse including cost of enforcement and loss of productivity as well as incarceration are also enormous on the lean Nigeria economy. There is a need to identify the determinants of substance abuse to mitigate their burden and contribute preventative and education programs. It is therefore imperative to carry out this research work in order to rescue the adolescent from imminent jeopardy.

### **1.5 Purpose of The Study**

This study investigated the psycho-social determinants of substance abuse among

adolescents in Ondo-State, Southwest, Nigeria. The study also examined the relationship between three psycho-social factors (poor academic performance, poor parenting and negative peer influence) and substance abuse

### **1.6 Research Hypotheses**

- i. There is no significant relationship between poor academic performance and substance abuse among secondary school adolescents in Ondo-State.
- ii. There is no significant relationship between poor parenting and substance abuse among secondary school adolescents in Ondo-State.
- iii. There is no significant relationship between negative peer influence and substance abuse among adolescents.
- iv. Psychosocial factors will not significantly determine substance abuse among adolescents

## **2.0 Methodology**

### **2.1 Research Design**

The study adopted a descriptive research design of the survey type. The study population comprised of all secondary school adolescents within the age range of 14-18 years in public secondary schools in Ondo-State southwest, Nigeria.

### **2.2 Sampling Method**

The sample consisted of 500 participants selected out of 1000 students in Senior secondary school (SS2) using Taro Yamane formula ( $n = \frac{N}{1 + N(e^2)}$ ). A multistage sampling procedure was employed to select the participants. In stage one, Ondo-State was selected out of the six states in southwest Nigeria through simple random sampling technique. In stage two, simple random sampling technique was used to select five out of the ten public secondary schools in Akure-North Local government area of Ondo-State. In the third

stage, purposive sampling technique was used to select 500 students within the age range of 14-18 from the five schools selected.

### **2.3 Data Collection Tool**

For the purpose of data collection, a 25 item questionnaire titled "Psycho-social Determinants of Substance Abuse Questionnaire" (PDSAQ) was developed by the researchers. The instrument was validated by experts in Tests, Measurement and Evaluation. The test-retest method was used to determine the reliability of the instrument. A reliability coefficient of 0.78 was obtained through Pearson Product Moment Correlation analysis. Four hypotheses formulated were tested at 0.05 level of significance. Data collected were analyzed using Descriptive, Pearson Product Moment Correlation and multiple regression analysis.

## **2.0 Results and Discussion**

### **2.1 Results**

Table 1 presents the demographic and social characteristics of the respondents. The result shows that 435 representing 87% of the total sample were 14-15years old while 57(11.4%) and 8(1.6%) were 16-17years and 18years respectively. Distribution of the respondents based on gender reveals that 268(53.6%) respondents were male while 232(46.4%) were female. The sample comprised of 331(66.2%) Christians, 153(30.6%) Muslim and 16(3.2%) Traditionalists. 388(77.6%) respondents indicated monogamous family type and 112(22.4%) were from polygamous homes. 234(46.8%) of the adolescents' parents were civil servants, 89(17.8%) Artisans, 137(27.4%) Business men and 40(8%) were farmers. Analysis of parents' marital status shows that 412(82.4%) were married, 16(3.2%) divorced and 72(14.4%) separated.

Table 1: Analysis of Respondents' Demographic Information

| Demographic Variable  | Groupings     | Frequency | Percentage |
|-----------------------|---------------|-----------|------------|
| Age                   | 14-15years    | 435       | 87.0       |
|                       | 16-17years    | 57        | 11.4       |
|                       | 18years       | 8         | 1.6        |
| Sex                   | Male          | 268       | 53.6       |
|                       | Female        | 232       | 46.4       |
| Religion              | Christianity  | 331       | 66.2       |
|                       | Islam         | 153       | 30.6       |
|                       | Traditional   | 16        | 3.2        |
| Family type           | Monogamy      | 388       | 77.6       |
|                       | Polygamy      | 112       | 22.4       |
| Parent occupation     | Civil servant | 234       | 46.8       |
|                       | Artisan       | 89        | 17.8       |
|                       | Business      | 137       | 27.4       |
|                       | Farming       | 40        | 8.0        |
| Parent marital status | Married       | 412       | 82.4       |
|                       | Divorced      | 16        | 3.2        |
|                       | Separated     | 72        | 14.4       |

Table 2 shows that the computed r-value (0.518) is significant at  $p < 0.05$  for the relationship between poor academic performance and substance abuse. The null hypothesis is rejected.

This implies that there is significant relationship between poor academic performance and substance abuse among secondary school adolescents in Ondo-State.

Table 2: Pearson Correlation of poor academic performance and substance abuse

| Variable                  | N   | Mean  | SD   | R      | P     |
|---------------------------|-----|-------|------|--------|-------|
| Poor academic performance | 500 | 8.51  | 2.87 | 0.518* | 0.000 |
| Substance abuse           | 500 | 47.95 | 7.97 |        |       |

\* $p < 0.05$

Table 3 shows that the computed r-value (0.577) is significant at  $p < 0.05$  for the relationship between lack of parental control and substance abuse among secondary school adolescents. The

null hypothesis is rejected. This implies that there is significant relationship between lack of parental control and substance abuse among secondary school adolescents in Ondo-State.

Table 3: Pearson Correlation summary poor parenting and substance abuse

| Variable                 | N   | Mean  | SD   | R      | P     |
|--------------------------|-----|-------|------|--------|-------|
| Lack of parental control | 500 | 16.95 | 5.47 | 0.577* | 0.000 |
| Substance abuse          | 500 | 47.95 | 7.97 |        |       |

\*p<0.05

Table 4 shows that the computed r-value (0.432) is significant at p<0.05 for the relationship between negative peer influence and substance abuse among secondary school adolescents. The

null hypothesis is rejected. This implies that there is significant relationship between negative peer influence and substance abuse among secondary school adolescents in Ondo-State.

Table 4: Pearson Correlation of negative peer influence and substance abuse

| Variable             | N   | Mean  | SD   | R      | P     |
|----------------------|-----|-------|------|--------|-------|
| Peer group influence | 500 | 7.12  | 2.87 | 0.432* | 0.000 |
| Substance abuse      | 500 | 47.95 | 7.97 |        |       |

\*p<0.05

Table 5 shows that there is significant joint contribution of psycho-social factors to substance abuse among secondary school adolescents in Ondo-State ( $F_{3,496}=764.036$ ,  $p<0.05$ ). The null hypothesis is rejected. The table reveals that there is significant positive multiple correlation between the predictor variables (poor academic performance, poor parenting and negative peer influence) and substance abuse among secondary school adolescents in Ondo State ( $r=0.907$ ,  $p<0.05$ ). This implies that all the predictor variables are factors that can exert influence on substance abuse among secondary school adolescents. The value of the coefficient of determination ( $R^2=0.822$ ) indicates that all the predictor variables jointly accounted for 82.2% ( $R^2 \times 100$ ) of the observed variance in substance among secondary school adolescents while the

remaining 17.8% unexplained variance is largely due to other variables that can account for substance abuse among secondary school adolescents.

The regression result in the table reveals that the single best predictor of substance abuse among secondary school adolescents is lack of parental control ( $\beta = 0.702$ ). This is closely followed by poor academic performance ( $\beta = 0.582$ ). The variable with the least contribution to substance abuse among secondary school adolescents is peer group influence ( $\beta = 0.268$ ). The calculated F-ratio (764.036) is significant at 0.05 level of significance. This implies that the predictor variables jointly provide a significant explanation for the variation in the substance abuse among secondary school adolescents in Ondo State.

Table 5: Multiple Regression analysis of psychosocial factors and substance abuse

| Model                     | Unstandardized Coefficients |            | Standardized Coefficients | T      | Sig. |
|---------------------------|-----------------------------|------------|---------------------------|--------|------|
|                           | B                           | Std. Error | Beta ( $\beta$ )          |        |      |
| (Constant)                | 11.593                      | .775       |                           | 14.968 | .000 |
| Poor academic performance | 1.613                       | .056       | .582                      | 28.585 | .000 |
| Lack of parental control  | 1.023                       | .028       | .702                      | 36.242 | .000 |
| Peer group influence      | .742                        | .055       | .268                      | 13.466 | .000 |

Multiple R=0.907, Multiple R<sup>2</sup>=0.822, Adjusted R<sup>2</sup>=0.82, F<sub>3,496</sub>=764.036

\*p<0.05

## 2.2 Testing of Hypotheses

### 2.2.1 Hypothesis 1

There is no significant relationship between poor academic performance and substance abuse among secondary school adolescents in Ondo-State.

### 2.2.2 Hypothesis 2

There is no significant relationship between poor parenting and substance abuse among secondary school adolescents in Ondo-State.

### 2.2.3 Hypothesis 3

There is no significant relationship between negative peer influence and substance abuse among adolescents

### 2.2.4 Hypothesis 4

There is no significant joint contribution of psycho-social factors to substance abuse among secondary school adolescents in Ondo-State.

## 2.3 Discussion

Findings from this study revealed that there was significant correlation between substance abuse and poor parenting among school adolescents. This is in line with Coleman and Davis (2008) who observed that lack of parental supervision, parents' absenteeism and experimental curiosity

all have significant relationship with substance abuse among school adolescents. Most parents especially those who work for long hours or always on business trips only return home late with little or no time to monitor their adolescents. This has brought about decline in family values. Instead of seeing parents as role models, adolescents now result to modelling of behaviors on social media. However, these findings contradict Abiodun *et al.* (2014) who noted that family factors like genetic heritability, attitude, personality problems and availability of illicit drugs are the main psychosocial problems of substance abuse among adolescents.

Findings also indicated that adolescents can result to substance abuse due to poor coping skills and frustration from poor academic performance as revealed by the outcome of this study. Most schools lack guidance and counselling units to respond to such situations. This finding is in line with Macleod and Davey (2003) who reported that students abuse drugs in order to react to failures with marked feeling of hurt and inferiority to low frustration tolerance.

Furthermore, findings also revealed that there was significant correlation between peer group influence and substance abuse among school adolescents. Most adolescents were observed to exhibit poor self-control and low assertiveness hence the curiosity to experiment with illicit drugs when they associate with drug abusers. This



agrees with the submission of Boluwaji *et al.* (2017) who concluded that association with drug use peers (cultists and confraternities) are immediate risk factors in school and communities.

Findings also showed that the three variables have significant joint correlation to substance abuse among school adolescents. However, poor parenting remains the best predictor of substance abuse among school adolescents. This is closely followed by poor academic performance while the least contributor is negative peer influence.

### 3.0 Conclusion

Substance abuse constitutes significant public health risks and therefore requires adequate interventions. Educating and informing individuals and families of the enormous challenge and the health risks associated with substance abuse must be considered locally starting from the family level to promote the well-being of the adolescents and minimize the menace in the society. This study identified poor parenting as the most determinant of substance abuse among the youths. This provides evidence for the urgent need to address the menace of substance abuse among school adolescents and also design and implement preventive intervention strategies both at home and in schools.

### 4.0 Recommendations

1. Based on the findings, there is urgent need for community participation in sensitization and mass campaign to mitigate the entry into substance abuse by the adolescents
2. There is need to strengthen government institutions that are in charge of drug control to step up their strategies to curb illicit drug production and supply
3. The family values of morality and proper parenting through adequate monitoring of youths should be strengthened in order to re-orientate the mindset of the adolescents
4. There is need for proactive drug counselling for secondary school students

and immediate review of the school curriculum to include illicit drug education

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