

Psychotropic Substances Abuse among Youths: A Study of Arrestees and Detained Offenders in Akwa-Ibom State, Nigeria

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ABSTRACT

The use of psychotropic substances among youths poses a global health challenge and constitutes a social problem in Africa. Nigeria shares a large portion of this alarming rate as many youths engage in this behaviour. This paper is aimed at assessing illicit drug abuse among arrestees and convicted offenders in Akwa-Ibom State. Several literatures on illicit drug abuse were reviewed and the social disorganization theory (Shaw and Mckay, 1942) was adopted for the study. The survey research method was employed and data was collected with the use of questionnaire administered to 120 respondents who were chosen using the purposive sampling technique. The findings of the study show that the social causes of IDA include the need to enhance performance, peer pressure, social learning, poor family upbringing, low

moral attachment, continued social stigmatization, availability of drug, stress from unemployment and poverty. Results also show that the consequences of IDA include fatal occupational accidents and injuries; physical or mental problems; violence, suicidal behaviours, and criminal activities; high absenteeism and turnover rates; decreased productivity and performance in the workplace; drug dependence and addiction; and family problems. The study recommended that adequate parental upbringing or supervision; counseling and guidance for people at risk; control and regulation of illicit drugs by anti-drug agencies; and provision of employment and reduction of poverty among youths, are possible remedial measures to combat IDA.

KEY WORDS: Psychotropic, Drug, Youths, Arrestees, Offenders, Substances

INTRODUCTION

The use of psychotropic substances is a global health and social problem (UNODC, 2005). Thus, concerted attempts have been made by several scholars and academic fields to understand issues surrounding the use and abuse of psychotropic substances, including the causal factors, consequences and combating measures, among others (Eze, 2001; Enakpoya, 2009; Ugwuoke and Otodo, 2015). Sociological perspectives or explanations, which are the focus of this paper, attribute drug use and abuse to various aspects of the social environment or context, including social structure, peer influences, weak social bonds, social interaction, and the larger drug culture (Hanson, Venturelli and Fleckenstein, 2012; Barkan, 2013). Such theories include functionalism, conflict or Marxist theory, and symbolic interactionism, anomie, social disorganization, social control, social learning, labeling or social reaction, and subculture perspectives. It takes

the application of these sociological theories to bring to the fore the fundamental issues associated with drug use and abuse, especially their causes and consequences, which can inform striking ideas about prevention, intervention, treatment, law enforcement, and social reactions to this ubiquitous social problem. However, the nature of this seminar paper cannot accommodate a detailed exploration of all the sociological theories on drug abuse, thereby paving way for adoption and justification of just a sociological theory.

Drug abuse is when someone is using drugs in a way that causes him/her harm. It is not just a matter of how much of a drug the person is using, but how their use affects their life and the lives of those around them. It is therefore a crime to use, possess, manufacture, or distribute drugs classified as having a potential for abuse. Global average estimates of regional use of illicit drug by the UNODC (2008) show that Africa is the second highest consumer of cannabis after Asia. In Africa, the Nigerian experience is quite alarming. According to the NDLEA (1997), the

use and abuse of drugs by adolescents have become one of the most disturbing health-related phenomena in Nigeria and other parts of the world. In Nigeria, most people use such drugs as coffee, kola nut, and cigarettes for staying awake; or take alcohol and tobacco as a way of relaxation; or take painkillers like aspirin in reducing body pains. These are seen as licit drugs. However, the use or abuse of drugs such as cannabis or marijuana, cocaine, heroin, and meth is seen as illicit in Nigeria. The widespread availability of these psychotropic substances and frequency in its usage engenders its abuse.

According to the NDLEA 2014 report, illicit drug use and abuse has been on the increase in Nigeria, despite efforts by anti-drug agencies in combating the menace. Statistics of arrest by geopolitical zones in Nigeria shows that North West, South West and North Central took the lead, while the South South came fourth and has over 38% of the females arrested for drug offences. Even though Katsina, Kano and Bauchi States constitute the highest in terms of the statistics of arrest nationwide, Akwa Ibom State

occupies the sixth position in the arrest table. In fact, 401 people have been arrested in the state (353 males and 48 females) and this constitutes (4.54%) of the total arrests in Nigeria in 2014 (NDLEA Report, 2014).

Surprisingly, only 148.65 kilogrammes of drug, especially cannabis, have been seized in Akwa Ibom (NDLEA, 2014). Thus, the seizure/arrest index (SAI) is 0.37%. However, the highest quantity of drugs seized during 2014 was made by the Sensitive Investigation Unit SIU followed by Delta and Edo State Commands with 28,063, 24,052 and 21,179 respectively. It is also worthy of note that 53,719,342.32kgs of cannabis sativa were destroyed on the farmlands, bringing the cumulative total of drugs seized in 2014 to 53,53,886,039.5kgs (NDLEA Report, 2014).

There is extensive research on psychotropic substance abuse as a crime at an international level, but there has been little or no empirical study that is sociologically-based in Nigeria and particularly in Akwa Ibom State. Having identified some problems associated with illicit drug

abuse and studies around them in Nigeria, this present study is an attempt to fill the observed gaps and use sociological perspectives in the study of illicit drug abuse in the State. This is noteworthy, as “sociological theorising is essential to the process of understanding crime because it engages with determinative realities that are otherwise often taken for granted and discounted” (O’Mahoney, 2000). Interestingly, this study engages in such theorising by explaining illicit drug abuse in Akwa Ibom State from a sociological perspective such as the social disorganization theory.

The drug situation in Akwa Ibom State, from the NDLEA’s report and cursory observation, is worrisome; and thus demands urgent attention. Therefore, the main objective of the study is to examine illicit drug abuse among involved arrestees and offenders in Akwa Ibom State, using sociological perspectives. Operationally, arrestees are people who are seized or captured and taken into legal custody or detained by officers of the NDLEA for taking, using or abusing illicit drugs; while convicted offenders are people who

are serving prison terms for breaking or violating drug laws of the Federal Republic of Nigeria, such as illicit drug abuse. Specifically, the study seeks to: identify social factors which predispose some people to illicit drug abuse in Akwa Ibom State; examine consequences associated with illicit drug abuse; and suggest possible remedial measures for combating drug abuse in the State. Social factors which influence illicit drug abuse include alienation, poverty, unemployment, social structure, peer influences, weak social bonds, social interaction, and the larger drug culture. It is thus argued principally in this paper that illicit drug abuse is mainly caused by social factors, and is likely to flourish in a disorganized society than in an organized one.

In an attempt to combat illicit drug use and abuse, the Nigerian government established the National Drug Law Enforcement Agency (NDLEA) in 1989 (through Decree 48 of 1989, now known as CAP N30 LFN 2004) and the agency commenced operations in 1990. Thus, the NDLEA is the main organ of the Federal Government of Nigeria responsible for, among other things,

controlling illicit drug use, abuse and trafficking; coordinating and enforcing all drug laws; adopting measures of eradicating illicit cultivation of narcotic plants and eliminating illicit demand for and use/abuse of narcotic drugs and psychotropic substances, and formulating and implementing drug control policies in Nigeria (NDLEA's 2014 Annual Report). Interestingly, the statistics provided by the NDLEA concerning illicit drug abuse and arrests add to the empirical colouration of this study. Also, more often than not, the explanations are pharmacological/medical and psychological. In simple terms, there is paucity of literature and empirical evidence concerning sociological explanations of drug use and abuse in Akwa Ibom State and Nigeria in general. Interestingly, this study, in an attempt to fill this gap, employs a sociological perspective to the study of illicit drug abuse in a Nigerian society.

THEORETICAL FRAMEWORK

Based on the foregoing this paper adopts the social disorganization theory as a suitable theoretical

underpinning for understanding the use and abuse of psychotropic substances in Akwa Ibom State.

The Social Disorganization Theory (SDT) is a widely used social-structural theory of crime, deviance and substance abuse. The social-structural approach emphasizes the effects of an individual's position in society and the constraints that the person's status puts on his or her perceptions and behavior. According to this model, all members of society subscribe to the same moral code but some people – because of their position in society – are more able than others to follow that code. Social-structural theorists assert that crime is an adaptation to the limitations that social position and environment places on individual behavior. Social-structural theorists focus their attention on socioeconomic status or social class and the strain that lower class status brings. The principal goal of these theories is to explain why poorer people engage in crime more frequently than wealthy individuals. The anomie and social disorganization theories are social-structural theories.

The social disorganization perspective follows substance users to their living era and environment. On the one hand, it examines why individuals move from one environment to another, how they struggle to adjust to a new environment, and how they are lured or forced into substance use, deviance, or criminal activity in the face of difficulty from the new environment or due to their individual maladjustment. On the other hand, it studies how a particular environment changes from generation to generation, how drastic change in a specific environment causes stress, disillusion, and disorder among individuals who live in it, and why substance use, deviance, crime, and other social problems tend to increase in a time when or in a place where change occurs abruptly (Shaw, 2002).

The theory was propounded by sociologists at the University of Chicago in the 1920s but popularized by Clifford Shaw and Henry McKay (1942), the social disorganization perspective looks into the social environment in which substance use occurs, fluctuates, persists, or desists. It focuses on how new or worsening

physical conditions prompt moral decay or problems in value adjustment, paving the way for substance use and deviant behavior. Social disorganization is a state of physical deterioration, spiritual disorientation, and general disorder or chaos in a society. Reflected in the experience of individuals, it is a period of stress, loss of control, pain, and suffering. Social disorganization takes place when a society undergoes fundamental change in a short period of time. Reform, revolution, industrialization, urbanization, and modernization are usual forces leading to social disorganization.

METHODS

The research was carried out in Akwa-Ibom state, Nigeria. The research adopted the survey-based descriptive study, and a sample size of 120 respondents which was drawn from the people who are presently arrested and detained for illicit drug related offenses and the general public in Akwa Ibom State. The respondents were randomly and purposefully selected. Data for the study were collected using a structured questionnaire made up of an accompanying cover letter and two

sections. Section “A” of the questionnaire covers the socio-demographic data of the respondents. Section “B” comprises of instruments concerning psychotropic substance abuse, causes, consequences, and remedies. The instruments for data collection were validated by two experts in criminology and penology.

The researchers, with the permission of officers in charge, visited and distributed questionnaire to the selected respondents in the prisons, police detention offices, and NDLEA’s detention offices in Akwa Ibom State. Some respondents filled the questionnaire at the spot, while those who could not fill it at the spot demanded to be given some time, say one week, to fill it. In the final analysis, descriptive statistics

(especially frequencies and percentages) were used to analyze the results of this study.

RESULTS

The demographic data of respondents collected shows that: majority of the respondents are males (64.2%); the youth (48.3%) were largely represented in the study; all the respondents acquired one form of education or another, with those who attended secondary (35%) and tertiary (30.8%) education as highest; majority of the respondents is married (40.8%); Christians constituted (73.3%); civil/public servants (47.5%) were largely used in the study; and majority of the respondents earned 11,000 – 30,000 naira as monthly income.

Table 1: Views of respondents on the reasons for psychotropic substance use

People take psychotropic substances:	Strongly Disagree	Disagree	Undecided	Strongly Agree	Agree
To enhance their performance at school, workplace, sports etc.	13 (10.8%)	6 (5%)	-	33 (27.5%)	68 (56.7%)
To be accepted by friends and peers	7 (5.8%)	19 (15.8%)	3 (2.5%)	64 (53.3%)	27 (22.5%)
To blend into the culture of their circles, associations and workplaces	11 (9.2%)	6 (5%)	5 (4.2%)	39 (32.5%)	59 (49.2%)
To relieve pains, stress, and tiredness	10 (8.3%)	9 (7.5%)	2 (1.7%)	21 (17.5%)	78 (65%)

To subdue or reduce emotional problems and personal inadequacies	-	-	5 (4.2%)	37 (30.8%)	78 (65%)
Low morality or religious attachment	12 (10%)	7 (5.8%)	4 (3.3%)	28 (23.3%)	69 (57.5%)
Because of the continued social stigma attached on them by others	23	4 (3.3%)	5 (4.2%)	38 (31.7%)	50 (41.7%)
Because they learn it from parents, friends, and others who abuse such drugs	6 (5%)	6 (5%)	4 (3.3%)	39 (32.5%)	65 (54.2%)
To overcome feelings of unemployment, poverty, and frustration	-	-	-	34 (23.3%)	86 (71.7%)
Poor family upbringing or supervision	4 (3.3%)	3 (2.5%)	2 (1.7%)	26 (21.7%)	85 (70.8%)
Because illicit drugs are easily available and inadequately controlled	12 (10%)	15 (12.5%)	4 (3.3%)	41 (34.2%)	48 (40%)
Because of environmental factors such as change of environment, slums, and crimogenic environment	10 (8.3%)	13 (10.8%)	6 (5%)	31 (25.8%)	61 (50.8%)

Table 1 shows the views of respondents on the different causes of illicit drug use. This ranges from enhance their physical performance, poor family upbringing to environmental factors.

Table 2: Views of respondents on the consequences of psychotropic substance use

Consequences of illicit drug abuse include:	Strongly Disagree	Disagree	Undecided	Strongly Agree	Agree
Fatal occupational accidents and injuries	4 (3.3%)	7 (5.8%)	-	22 (18.3%)	87 (72.5%)
Physical or mental problems	6 (5%)	2 (1.7%)	4 (3.3%)	29 (24.2%)	79 (65.8%)
Violence, suicidal behaviours, and criminal activities	-	-	-	23 (19.2%)	97 (80.8%)
High absenteeism and turnover rates	22 (18.3%)	12 (10%)	7 (5.8%)	23 (19.2%)	56 (46.7%)
Decreased productivity and performance in the workplace	6 (5%)	5 (4.2%)	4 (3.3%)	32 (26.7%)	76 (63.3%)

Drug dependence and addiction	14 (11.7%)	17 (14.2%)	10 (8.3%)	30 (25%)	49 (40.8%)
Poor familial interaction and divorce	12 (10%)	11 (9.2%)	10 (8.3%)	25 (20.8%)	62 (51.7%)

Table 2 shows the views of respondents on the consequences of illicit drug use among arrestees and convicted offenders. The consequences range from occupational accidents, physical and mental problems, violence and criminal behaviours, to poor familial interaction and divorce.

DISCUSSION OF FINDINGS

This study is apt following the alarming increase in drug consumption of psychotropic substances. The result of this study shows that illicit drug abuse is related to certain social categories. As shown by the present study, males, young and the unmarried take or abuse illicit drugs more than other social categories. This confirms and adds to Room (2006) finding that the abused or neglected youths, the homeless, the physically or mentally handicapped, school drop outs, children of substance abusers, street children and the economically disadvantaged.

Results from the present findings also show that there are multiple causes of psychotropic substance abuse. Based mainly on social context-based causes, people use or abuse illicit drugs in order to enhance their performance at school, workplace, sports etc; to be accepted by friends and peers; to blend into the culture of their circles, associations and workplaces; to relieve pains, stress, and tiredness; to subdue or reduce emotional problems and personal inadequacies; because of low moral or religious attachment; because of the continued social stigma attached on them by others; because they learn it from parents, friends, and others who abuse such drugs; to overcome feelings of unemployment, poverty, and frustration; poor family upbringing or supervision; because illicit drugs are easily available and inadequately controlled; and because of environmental factors such as change of environment, slums, and criminogenic environment. This finding is corroborated by the studies of (Yang, Yang, and Liu, 1998; Haladu, 2003; Taylor, 2003; Atoyebi and Atoyebi, 2013).

The consequences of illicit drug abuse, as shown in this present study, include fatal occupational accidents and injuries; physical or mental problems; violence, suicidal behaviours, and criminal activities; high absenteeism and turnover rates; decreased productivity and performance in the workplace; drug dependence and addiction; and poor familial interaction and divorce (Oshikoya and Alli, 2006; Mba, 2008; Sambo, 2008; Arthur, 2009; Zumpano, 2009).

CONCLUSION/POLICY IMPLICATIONS

Interestingly, the significance of this present work is appreciated in its capacity to view psychotropic substance abuse from sociological lens or perspectives and as well carry out empirical research on the socio-cultural factors in psychotropic substance abuse. Thus, this study is very significant for its contribution to both theoretical and methodological literature on psychotropic substance abuse. Consequently, results of this study will serve as basis for planning appropriate intervention methods for the control of drug abuse among the youths. Stake holders can rely on the results to focus

on socio-cultural and economic factors which can effectively combat illicit drug abuse and even prevent people from getting involved in it, rather than relying on clinical remedies when the actual social causes have not been taken care of.

Therefore the study put forward the following recommendations:

- The federal Government of Nigeria should reposition the National Drugs Law Enforcement Agency to meet with current trend in drug war. This can be done by effective funding and legislation.
- Effective reorientation of the youths should be carried out by the national Orientation Agency (NOA) in collaboration with the NDLEA on the dangers of psychotropic drug use. This can be done through traditional and religious leaders who will in turn sensitize their subjects.
- The dangers of psychotropic drug use should be incorporated in our school curriculum so that students can be privy of the dangers of drug use from the cradle.

- The NDLEA should consider the use of counselling and psychotherapy in the fight against psychotropic drug abuse, instead of the confrontational approach it is using now. More psychologists, counsellors, sociologists and other professionals should be engaged by the NDLEA in this regards.
- Parents should be trained how to dictate drug use by their children. They should also be trained in the act of counselling.

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