



Drug-Substance Abuse, Age at Onset and Contributing Factors to Stoppage of Drug Use among Students in Aluu Community

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Authors' contributions

This work was carried out in collaboration between both authors. Author CN designed the study wrote the protocol, Author VO did the study analyses and statistical analysis. Author CN wrote the first draft of the manuscript. Author VO managed the literature search. Both authors read and approved the final manuscript.

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ABSTRACT

Background: Most drug-substance abusers do have withdrawal symptoms considering the type of drug. Some of the symptoms include: changes in appetite, changes in mood, congestion, seizure, fatigue etc. These symptoms make it difficult for someone to effectively withdraw. It therefore means that for someone to effectively withdraw from drug abuse, there are other factors that must come into play to enhance success. Hence, this study was done to determine the contributing factors to stoppage of drug use among students in university of Port Harcourt's host communities as an attempt to curb the menace and its effect on students and the entire society at large.

Materials and Methods: The study was a descriptive cross-sectional study carried out in ALUU Community in Ikwerre Local Government Area of Rivers State between August 2019 and December 2019. The study involved 150 volunteers recruited randomly through a multi-staged sampling technique which included secondary school students, undergraduates who are 13yrs and above residing in ALUU community while those who did not give consent were excluded. The data was collected using self-structured close-ended self-administered questionnaires and data analysis done using SPSS version 25.

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Results and Discussions: The results of the study showed that the proportion of students that have stopped drug/substance abuse was 7.34%, the most prevalent age group at onset of drug use was 16-18yrs, and 26.42% of students used drugs/substance daily. The most prevalent reason for stopping drug use was personal decision 54.55%, while the least proportion was other reason 9.09%; Family and religious leaders had equal influence (45.45%) in the stoppage of drug/substance use by students.

Conclusion: The results of the study showed that the most prevalent reason for stopping drug use was personal decision 54.55%, Family and religious leaders (45.45%) were the major contributing factors and had equal influence in the stoppage of drug/substance use by students.

Keywords: Substance abuse; age at onset; contributing factors; drugs; students; aluu.

1. INTRODUCTION

Substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs [1,2]. One of the key impacts of illicit drug use on society is the negative health consequences experienced by its members and the community around them [1,2]. Drug use also puts a heavy financial burden on individuals, families and society [3,4]. People who abuse drugs and other substances always have difficulties withdrawing due to addiction.

Withdrawal symptoms are a combination of physical and mental effects that a person experiences after they stop using or reduce their intake of a substance [4]. Some of the symptoms includes: changes in appetite, changes in mood, congestion, seizure, fatigue etc [5]. These symptoms makes it difficult for someone to effectively withdrawal. Although, some authors have argued that addiction also is different from physical dependence or tolerance. In cases of physical dependence, withdrawal symptoms happen when you suddenly stop a substance. Tolerance happens when a dose of a substance becomes less effective over time [6,7]. It therefore means that for someone to effectively withdraw from drug abuse, there are other factors that must come into play to enhance success. Hence, this study was done to determine the contributing factors to stoppage of drug use among students in university of Port Harcourt's host communities as an attempt to curb the menace and its effect on students and the entire society at large.

There are reports on similar subject and related matters by other authors in other regions of the country and in international communities [8-13].

2. MATERIALS AND METHODS

The study was a descriptive cross-sectional study carried out in ALUU Community in Ikwerre

Local Government Area of Rivers State. ALUU is an upland community with a vast arable land making majority of the people farmers. The main language ALUU is Ikwerre with pidgin as a secondary language and consists of nine villages which include: Omuike, Omuoda, Omuigwe, Mbodo, Omahunwo, Omuchiolu, Omuokiri, Omuhuechi, Omuoko. Rivers State is situated in the South-south geopolitical zone of Nigeria with its capital in Port Harcourt. The estimated population of Rivers State is put at 6,689,087 (2006 census) and the land mass is about 11,077 square kilometers. The state is home to numerous ethnic groups some of which are: Ikwerre, Ijaw, Kalabari, Etche, Ogba/Egbema/Ndoni, Ogoni, Ekpeye, Engenmi, Ibani, Andoni, Abua, Okrika, Ikwerre and Ijaw are the most spoken languages although, English is also widely spoken.

The study was limited to students residing in Aluu community in Ikwerre Local Government Area of Rivers State, South-South Nigeria. The study included secondary school students, undergraduates and post graduates (10yrs and above) residing in ALUU community; while those who did not give consent were excluded.

The sample size for the study population was determined using the formula,

$$n = \frac{p \cdot q}{e^2} \cdot 1.96$$

Where n = required sample size

P = estimated proportion/working prevalence (from a previous study)

e = margin of sampling error tolerated or precision

q = 100-p

The confidence interval used for the study was 95%, where 'e' is a 5% tolerable error, the calculated minimum sample size was 136; a non-response of 10% was added and the figure rounded up to 150.

2.1 Sampling Method

The sampling method adopted for this study was multi stage sampling. At the stage one: only one (Omuokiri) out of the nine villages in ALUU community was randomly selected based on the assumed students' population as there was no accurate data to that effect. At stage two: houses were systematically chosen at interval of alternate households, and at the final stage: all eligible students in these households were administered the questionnaires.

2.2 Data Collection

The research tool used was a self-structured close-ended self-administered questionnaires. The tool was structured based on the objectives of the study: Section A- information about the socio-demographic characteristics, Section B- the use of drugs and Section C-the type of drugs that is most often abused.

2.3 Duration of Study

The study was done from September – December, 2019.

3. RESULTS

Below are the results from the study:

In Table 1, males were the most frequent gender 71.0%, the most frequent age group was 23-

24yrs, mean age 23 ± 6.64 yrs, and the most frequent educational level were undergraduates.

In Table 2, the prevalence of drug/substance abuse was 35.33%, the proportion of students that have stopped drug/substance abuse was 7.34%, the most prevalent age group at onset of drug use was 16-18yrs, and 26.42% of students used drugs/substance daily.

In Table 3, the most prevalent reason for stopping drug use was personal decision 54.55%, while the least proportion was other reason 9.09%; Family and religious leaders had equal influence (45.45%) in the stoppage of drug/substance use by students.

In Table 4, only 1.98% of students who use drugs have been involved in a treatment program specifically related to drug use, and none have been arrested for possession of illegal drugs.

4. DISCUSSIONS

4.1 Summary of Results

The sociodemographic characteristics showed that the males were 71.0%, the most frequent age group was 23-24yrs, mean age 23 ± 6.64 yrs, and the most frequent educational level were undergraduates; The prevalence of drug/substance abuse was 35.33%, the proportion of students that have stopped drug/substance abuse was 7.34%, the most prevalent age group at onset of drug use was 16-18yrs, and 26.42% of students used

Table 1. Sociodemographic characteristics

S/N	Sociodemography	Frequency (n)	Per cent (%)
1	Gender distribution		
	Male	106	71.0
	Female	44	29.0
	Total	150	100.0
2	Age group distribution (yrs.)		
	10 - 14	8	5.3
	15 - 19	22	15.0
	20 – 24	63	42.0
	25 - 29	45	30.0
	≥30	12	7.7
	Total	150	100.0
3	Mean Age	23 ± 6.64	
4	Educational level		
	Secondary	13	8.0
	Undergraduate	126	84.67
	Postgraduate	11	7.33
	Total	150	100.0

Table 2. The distribution of use of drugs/substances, age at onset, use amongst friends and family, frequency of drug use

Variable	Frequency (n)	Per cent (%)
Drug/ substance use by students		
Yes	53	35.33
No	86	57.33
Stopped use of drug/substance	11	7.34
Total	150	100.0
Distribution of age at onset of drug use		
13-15yrs	40	26.42
16-18yrs	59	39.62
19-21 yrs	42	28.30
22-24yrs	9	5.66
≥25yrs	0	0.00
Total	150	100.0
Distribution of drug use among family and friends		
Friends	81	54.72
Family	25	16.98
Others	44	28.30
Total	150	100.0
Frequency of drug use		
Everyday	40	26.42
Every 2-3 days	14	9.44
Once in a week	20	13.21
Once in 2 weeks	25	16.98
Once in a month	20	13.21
Others	31	20.74
Total	150	100.0
Age of onset of drug use by students that have stopped drug use		
13-15yrs	27	18.18
16-18yrs	81	54.55
19-21 yrs	42	27.27
22-24yrs	0	0.00
≥25yrs	0	0.00
Total	150	100.0

Table 3. Distribution of reasons and contributing factors for stoppage of drug/substance abuse

Variables	Frequency (n)	Per cent (%)
Reasons for stoppage of drug use		
Religious reasons	28	18.88
Health related reasons	28	18.88
Personal decision	80	53.15
Socio-economic reason	0	0.00
Others	14	9.09
Total	150	100.0
Contributing factors for stoppage of drug use		
Family	68	45.45
Friends	14	9.10
Religious leaders	68	45.45
Mass media	0	0.0
Others	0	0.0
Total	150	100.0

Table 4. Distribution of effects of drug/substance abuse on students using drugs

Variables		Frequency (n=53)	Per cent (%)
Can you get through the week without drugs?	Yes	41	77.36
	No	12	22.64
Are you always able to stop using drugs when you want?	Yes	43	81.13
	No	10	18.87
Have you had blackouts and/or flash backs as a result of your drug use?	Yes	9	16.98
	No	44	83.02
Do you ever feel bad or guilty about your drug use?	Yes	12	22.64
	No	41	77.36
Have drug created problems between you, your parent, teachers, or friends?	Yes	11	20.75
	No	42	79.25
Have you lost friends because of your drug use?	Yes	6	11.32
	No	47	88.68
Have you neglected your studies because of your drug use?	Yes	3	5.66
	No	50	94.34
Have you gotten into fight or trouble when under the influence of drug?	Yes	13	24.53
	No	40	75.47
Have you engaged in illegal activities in order to obtain drug?	Yes	3	5.66
	No	50	94.34
Have you been arrested for possession of illegal drugs?	Yes	0	0.00
	No	53	100
Have you ever tried to stop your drugs of abuse?	Yes	17	32.08
	No	36	67.92
If yes, did you experience withdrawal symptoms?	Yes	7	41.18
	No	10	58.82
Have you had medical problems as a result of drug use?	Yes	0	0.00
	No	53	100
Have you gone to anyone for help for drug problems	Yes	1	1.98
	No	52	98.11
Have you been involved in a treatment program specifically related to drug use?	Yes	1	1.98
	No	52	98.11

drugs/substances daily. The most prevalent reason for stopping drug use was personal decision 54.55%, while other reasons constituted 9.09%; Family and religious leaders had equal influence (45.45%) in the stoppage of drug/substance use by students. Only 1.98% of students who use drugs have been involved in a treatment program specifically related to drug use, and none have been arrested for possession of illegal drugs.

4.2 Implications

The study has shown that the students who abuse drugs/substance have a very high proportion of friends who also use drugs, and a family history of drug abuse. Family and friend's influence has proven to be instrumental in influencing the use of drugs by students. The most prevalent age group at onset of drug use was 16-18yrs which corresponds to the age between just leaving secondary school (high

school) and preparation for university (college). This is one period of time when parents and guardians need to pay a very close attention to their children and wards as any form of negligence or oversight would lead to such child meddling with drugs. This is the time when most adolescents are prone to negative tendencies owing to idleness since they are out of school. This agrees with the results by previous authors [8-10].

The proportion of students that have stopped drug/substance abuse was far less than one-third this appears to be little, but it is progress. The study again, revealed that the family and religious leaders contributed equally to the stoppage of drug use, which means that consistent synergy between the family and religious leaders would go a long way in further reducing the prevalence of drug use in the community. The role of counselling and introduction of programs geared at educating and

liberating students from drug use will be effective as well, considering that only 1.98% of students who use drugs have been involved in a treatment program specifically related to drug use. Although the most prevalent reason for stopping drug use was a personal decision, it would not be out of place to put all efforts together to make sure such students make the decision to quit drugs. The findings of this study are consistent with the reports by other authors who have researched on similar subjects [11-13].

Findings from the studies implies that students who abuse drugs/substances can successfully withdraw as a result of self-will being the denominator, whilst contributions from religious leaders and family inputs as supports to achieving the goal.

5. CONCLUSION

The results of the study showed that the proportion of students that have stopped drug/substance abuse was 7.34%, the most prevalent age group at onset of drug use was 16-18yrs, and 26.42% of students used drugs/substance daily. The most prevalent reason for stopping drug use was personal decision 54.55%, Family and religious leaders (45.45%) were the major contributing factors and had equal influence in the stoppage of drug/substance use by students.

CONSENT AND ETHICAL APPROVAL

The ethics committee of the University of Port Harcourt gave approval before the commencement of the study. In addition, the gate keepers of the community gave a verbal approval for the study to be done in the community. Afterwards, an informed consent was gotten from the respondents and assurance of confidentiality was given to the respondents.

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COMPETING INTERESTS

Authors have declared that no competing interests exist.

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