Factors Influencing Drug Use and Abuse among Undergraduate Students of a Tertiary Institution in Nigeria

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Declaration of Interest: None

Abstract: Objective: Psychoactive drug use has been identified by World Health Organization (WHO) as a significant social and public health concern with increasing prevalence despite efforts to stem the tide globally. Many factors have been adduced to influence drug use among students of tertiary institutions in Nigeria. Determining some of these factors will help in formulating primary preventive strategies. Therefore, the objective of this study was to assess factors influencing drug use among students of Ahmadu Bello University (Samaru Campus). Methods: The study was a descriptive cross sectional involving four hundred and forty (440) subjects, using multistage sampling techniques. All the subjects consented and participated in the study. Self administered socio demographic, WHO students’ drug use and factors influencing drug use questionnaires were given to the subjects to fill through their class representative. Data analysis was done by statistical package for social science (SPSS) 15th editions. Results: One hundred and fifty (150) respondents constituting 34.1% were from faculty of Engineering, one hundred and fifteen (115) respondents constituting 26.1% were from faculty of Education while one hundred and seventy five (175) respondents constituting about 39.8% were from college of Medicine. All the 10 drugs examined by the questionnaire were used by male sex while their female counterpart used only alcohol and tobacco. The age of onset of tobacco use revealed that 23 (74.2%) of 61 respondents commenced the use between 11 and 12years of age. The differences in age of onset of tobacco use was significant (df=5, X² = 21.07, P = 0.001). Fifteen (52%) of the thirty two cannabis users revealed that boldness to talk was the main reason why they use cannabis while 2 (20%) use cannabis to satisfy Friends. The difference was significance (df = 4, X² = 10.69, P = 0.03). That of Christian faith has more subjects with alcohol usage than the respondents with Islam faith. The two Hindu believers were alcohol users. The difference was also, statistically significance (df = 2, X = 18.18, P = 0.00). None of the Hallucinogenen users were from college of Medicine. Many subjects among those using Opioid revealed that it’s easy sourcing it and their friends were the source of the drug. School performance, behavioural and legal problems were also statistically significance with some the drugs examined. Conclusions: Psychoactive drug use was found among students of Ahmadu Bello University Zaria like in other institutions of higher learning in Nigeria. Many factors were also found to have influenced the use of drugs among them. The need to formulate and implement policies to stem the tide is therefore imperative.

Keywords: Psychoactive drug use and Abuse, Factors Influencing Drug Use, Undergraduate Students in Nigeria

1. Introduction

Psychoactive drug use continues to exact a significant toll on human lives and productive years of many persons being lost (World drug report 2014). The use of substance to alter mental function has been reported since ancient times. Reasons for use of drugs especially among youths include, curiosity, to feel good, to reduce stress and to feel grown up among others. Some will experiment and stop, others will turn into occasion users while other will develop addiction moving into more harmful drugs thereby causing harm to themselves and others.

One of the determinants of drug use and abuse is availability of these substances.

In many areas, psychoactive substance can be easily obtained from kiosks, bars, restaurants and street vendors creating an increase in supply and demand for such substances. Its use has been reported to closely link to an increase in availability and access to the substance by a large proportion of the community (Omigbodun & Babalola 2014).

In a study by Kalovanides KB et al (2007) involving 5389 undergraduate college students plus an additional 1530 undergraduate college students of various ethnic backgrounds over a 2-month period revealed no prescription stimulant use. Undergraduate students to whom stimulants were prescribed in grades K-4 reported similar rates of alcohol and other drugs use compared with that of the group that had no prescription stimulant use. The study further revealed that, undergraduate students whose prescription stimulant use began in college had significantly higher rates of alcohol and other drugs use.

In assessing prevalence and risk factors associated with drug abuse among public elementary and high school students in the southern city of Florianópolis, Brazil (Baus, Kupek & Pires 2002), the result revealed Ever use prevalence for alcohol, marijuana, solvent drugs and
amphetamines was 86.8%, 19.9%, 18.2% and 8.4%, respectively. Regular use (6 or more times per month) of alcohol, marijuana, solvent drugs and amphetamines was found in 24.2%, 4.9%, 2.5% and 2.3% of students, respectively, a higher percentage when compared to other southern states' capitals and the national average. Age, sex, social status and living with both parents were significantly associated with drug abuse. Girls were twice as likely to consume weight loss drugs and stimulants, and almost three times more likely to use tranquilizers without medical prescription. Boys were almost twice as likely to use solvent drugs. Higher social students were twice as likely to consume alcohol than those of lower social status. Cigarette and marijuana smoking, respectively, were 84% and 67% more likely among students whose parents were separated.

In a study investigating the prevalence of illicit drug use, cigarette smoking and alcohol drinking behaviour among a sample of 435 secondary-school adolescent students around the Pietersburg area (Central Region), in the Northern Province, South Africa. Findings of this study indicate the prevalence rate of 19.8% for illicit drug use, 10.6% for cigarette smoking and 39.1% for alcohol consumption among the participants. Drug use, cigarette smoking and alcohol consumption are associated more with males than with females. The majority of the drug users and cigarette smokers indicated that they do so when they are bored, tired or stressed up, or at parties; and most of those who drink alcohol indicated that they do so at parties, weekends, or any other time. The mean age for first drug use was 14.9 years (S.D.=1.77); 14.54 years (S.D.=1.80) for first cigarette smoking and 15.33 years (S.D.=1.91) for first alcohol consumption (Madu & Matla 2003).

Shehu & Idris (2008) in a study of factors responsible and effects on academic performance of marijuana smoking among 350 secondary school students in Zaria, Nigeria revealed that 33 of the students smoke marijuana giving a prevalence of 9.4%. There were more smokers in the age group 15-19 years (54.6%). Other factors that influence marijuana smoking include family background, peer pressure and attendance of social functions. There was better academic performance (51.1%) among non smokers as compared to smokers (27.2%), and this was found to be statistically significant (chi² = 11.73, df = 5, P < .05). There was also statistically significant association between age and marijuana smoking (chi² = 24, df = 2, P < .05). The prevalence of marijuana smoking is high. Age, family background, peer pressure and attendance of social function influence marijuana smoking. A comprehensive school health education program should be instituted to curtail this menace. In another study in the same environment Zaria, Nigeria, Idris & Sambo (2009) reported that 157 (56%) of the students studied use one or more substances. The commonest ones are kola nut followed by cigarette and marijuana. The commonest push factor for use is to experiment (54%). The study also shows, statistically significant relationship between family background and psychoactive substance use (chi² = 21.57, df = 2 p < 0.05), however no statistical significance was found between age, class of the students and substance use respectively (chi² = 1.94, df = 2 p > 0.05) (chi² = 0.97, df = 2p > 0.05). They concluded their study noting that prevalence of psychoactive substances use is unacceptably high and the main trigger identified was the process of experimentation in order to discover their effects. They suggested the need to institutionalize preventive strategies against substance abuse in our secondary schools.

Drug abuse has been reported to be one of the main causes of impairment of social competence and performance. School poor performance, drop out, criminal tendencies and poor social interaction have all been reported to be associated with drug abuse. Increasing abuse of drug by student sometimes leads to confrontation between school administrator and students.

It has been recognized that many psychoactive substance produce psychiatric like disorder. Co-morbidity between many mental disorder and drug/substance dependency have also been reported.

The overall effect of drug use and its abuse on individual, family and society in general is enormous and there is need for preventive measures to avoid dire consequences. Identifying the factors influencing the use will help in primary prevention among students.

**Study Population:** Students of Ahmadu Bello University.

Inclusion criteria: Undergraduate students (Samaru campus) of Ahmadu Bello University, Zaria

Exclusion criteria: Diploma, Postgraduate students of the school as well as students of congo campus of the institution.

### 2. Study Design

The study design was descriptive cross sectional study. Registered students of Samaru campus of the institution were used for the study.

**Sampling size calculation**

The formula use for calculation is

\[ N = Z^2_{pq} (q = 1-p) \]

\[ d^2 \]

**Minimum Size**

Where:

\[ Z = \text{A constant at 95\% confidence internal interval from} \]

\[ P = \text{Prevalence of substance use among university students is 52\% } (P \text{ is } 0.52) \] (Yunusa obembe & Asogwa (2012)

\[ q = 0.48 \]

\[ d = 0.05 \text{ degree of accuracy desired, that is precision error that will be tolerated in the study is 0.05.} \]

\[ N = 1.96^2 \times 052 \times 0.48 = 383.5 \]
0.05²

Attirion Ratio = 316 /2200 x 100=14%
14/100x 384= 53.76
Approximation= 384+54= 438

Sampling Technique
Multistage and random sampling technique was used to select the minimum sampling size.

Stage one: Faculty (Medicine, Engineering and and Education)
Stage Two: Department (Medicine, Electrical and Physical education)
Stage Three: Levels (100- 600 levels)
Stage Four: Respondents

Total Minimum sample size = 438

Study instrument
The world health organization (WHO, 1980) modified self administered questionnaire for student drug use survey was adopted for the study. The questionnaire had previously been reported to have acceptable reliability and validity in this environment: The questions consist of socio-demographic characteristic questions and use of specific substance questions and factors contributing to drug use.

3. Procedure
The self administered questionnaires were distributed for filling through the class’s coordinator to randomly selected participants September/October 2012; the returned questionnaires were thereafter analyzed. All the levels of study except 600level of college of medicine that were not available as of time of data collection participated in the study.

4. Data Analysis
Data analysis was done by statistical package for social science (SPSS) 15th editions. Description statistic for examples mean and S.D were calculated. Chi-square was used for categorical variables and level of significance was set at P <0.05.

5. Ethical Consideration
The ethical committee of Ahmadu Bello University Zaria Kaduna State was informed about the study and its purpose. Permission was obtained from the Department of Community Medicine before the study was conducted.

The students that participated in the study were also informed and consent obtained before commencement of the study. The participants were informed that they can decline participation at any stage of the study. Privacy and confidentiality were also assured before data taken.

6. Results
Four hundred and forty (440) students drawn from 3 faculties of the university participated in the study. These faculties were Engineering, Education and College of Medicine.

One hundred and fifty (150) respondents constituting 34.1% were from faculty of Engineering, one hundred and fifteen (115) respondents constituting 26.1% were from faculty of Education while one hundred and seventy five (175) respondents constituting about 39.8% were from college of Medicine (Table 1).

| Table 1: Faculty and Level of Study of Respondents |
|-----------------------------------|------------|-----------|
| Faculty                          | Frequency  | Percentage|
| Engineering                      | 150        | 34.1      |
| Education                        | 115        | 26.1      |
| Medicine                         | 175        | 39.8      |
| Level                            |            |           |
| 100                              | 90         | 20.5      |
| 200                              | 120        | 27.3      |
| 300                              | 89         | 20.7      |
| 400                              | 82         | 18.6      |
| 500                              | 59         | 13.4      |

Prevalence of substance/Drug use among undergraduate students of Ahmadu Bello University (Samaru Campus).
Socio-demographic characteristic of drug/substance use respondents.

<p>| Table 2: Shows socio-demographic characteristic of one hundred and thirteen subjects that used drug/substance. N=113 |
|---------------------------------------------------------------|-------------------|-------------------|</p>
<table>
<thead>
<tr>
<th>S/N</th>
<th>Socio-Demographic</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>99</td>
<td>87.6%</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>14</td>
<td>12.4%</td>
</tr>
<tr>
<td>2.</td>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>17-25</td>
<td>87</td>
<td>77%</td>
</tr>
<tr>
<td></td>
<td>26-48</td>
<td>26</td>
<td>23%</td>
</tr>
<tr>
<td>3.</td>
<td>Religion</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Islam</td>
<td>43</td>
<td>38.1%</td>
</tr>
<tr>
<td></td>
<td>Christians</td>
<td>69</td>
<td>61.1%</td>
</tr>
<tr>
<td></td>
<td>Others</td>
<td>1</td>
<td>0.8%</td>
</tr>
<tr>
<td>4.</td>
<td>Tribe</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hausa/Fulani</td>
<td>35</td>
<td>30.9%</td>
</tr>
<tr>
<td></td>
<td>Yoruba</td>
<td>18</td>
<td>16%</td>
</tr>
<tr>
<td></td>
<td>Igbo</td>
<td>6</td>
<td>5.3%</td>
</tr>
<tr>
<td></td>
<td>Ebbri</td>
<td>6</td>
<td>5.3%</td>
</tr>
<tr>
<td></td>
<td>Idoma</td>
<td>4</td>
<td>3.5%</td>
</tr>
<tr>
<td></td>
<td>Igala</td>
<td>9</td>
<td>8%</td>
</tr>
<tr>
<td></td>
<td>Tiv</td>
<td>5</td>
<td>4.4%</td>
</tr>
<tr>
<td></td>
<td>Others</td>
<td>30</td>
<td>26.6%</td>
</tr>
</tbody>
</table>

One hundred and thirteen subjects had used one or more substance in the lifetime. Three hundred and twenty seven participants revealed they had never taken any substance in their lifetime.
Drugs/Substances and factors influencing their use

**Tobacco:**

Sixty one (13.9%) of the respondents use tobacco. The age of onset of tobacco use revealed that 23 (74.2%) of sixty one respondents commenced the use between 11 and 12 years of age. The difference among sixteen age group was significant (df = 5, X² = 21.07, P = 0.001). Thirty two (80%) of the tobacco use were of Islam faith while twenty eight (39.4%) were of Christian faith. One of the 2 Hindu religious faiths uses tobacco. The difference was noted to be statistically significant (df = 2, X² = 16.96, P = 0.00). All the tribes except Idoma had respondents who use tobacco. The difference was however not statistically significant. Twelve (86%) of tobacco use respondents has problem use law enforcement agencies. The difference was noted to be of statistical significance. The result also revealed that forty (64.5%) of the 61 tobacco users has 5 years & above duration of the usage (df = 4, X² = 12.07, P = 0.01). Also, of statistical significance was the number of drug use. Nineteen (86.4%) uses four & more drugs in compliance with 18 (30%) that used only tobacco (df = 3, X² = 4.55, P = 0.18).

**Cannabis**

Thirty two (7.3%) of the respondent use cannabis. One (90.1%) responded stated use of cannabis of 19 years and above while another one started use of 10 years of age. Ten (32.3%) of cannabis users stated the use by 11-12 years. The difference was not statistically significant (df = 5, X² = 9.442, P = 0.093).

Seventeen (42.5%) cannabis users were of Islam faith while 14 (19.7%) were of Christian faith. One of the two Hindu used cannabis (df = 2, X = 7.013, P = 0.03). Eighteen (42.9%) of the 32 cannabis users were from faculty of Engineering while 9 (22.5%) were from College of Medicine. Five (16.1%) were from Faculty of Education. The difference was of statistical significance (df = 2, X² = 7.31, P = 0.026).

Twenty nine (35%) revealed that as easy to get cannabis as compound with 3 (30%) which revealed that its difficult to get.

Fifteen (52%) of the thirty two cannabis users revealed that boldness to talk was the mean why they use cannabis while 2 (20%) use cannabis to satisfy friends. The difference was significant (df = 4, X² = 10.69, P = 0.03). Eight (100%) had problem in their academic performance, 10 (71.4%) had held problem while 9 (90%) had problem with other people. Twelve (75%) increased their dosage of cannabis when their initial dosage couldn’t achieved their desired effect. Thirteen (61.9%) tried without success to stop the usage of the drug. Cannabis use parents of seven (63.6%) were aware their wards used cannabis (df = 1, X² = 7.48, P = 0.006).

Eighteen (81.8%) used cannabis and other 4 drugs while two (33.3%) uses only cannabis. The difference was statistically significant (df = 3, X² = 60.84, P = 0.00).

**Alcohol:**

Seventy four (16.8%) of the 440 respondents used alcohol. Twenty two (81.5%) of the seventy four respondents that used alcohol had their age of onset between 17-18 years age while sixteen (51.6%) stated use of alcohol between 11-13 years. The difference noted was not statistically significant (df = 5, X² = 7.19, P = 0.21). Forty (78.9%) of the seventy four resided outside the school premises while thirty four (54.8%) stayed in the hostel. The difference was statistically significant (df = 1, X² = 6.89, P = 0.009). Those of Christian faith has more subjects with alcohol usage than the respondents with Islam faith. The two Hindu believers were alcohol users. The difference was statistically significant (df = 2, X = 18.18, P = 0.00).

The seven TIVs and seven Igbos were alcohol users, while 10 were of Yoruba origin and 13 were Hausa/Fulani tribe. The difference was statistically significant (df = 7, X = 22.32, P = 0.002). Twenty four (77.4%) of seventy four alcohol users were from faculty of education while nineteen were from college of medicine. The result also revealed that sourcing for alcohol is easy as revealed by sixty (72.3%) compared with four (40%) which revealed that its difficulty to get alcohol (df = 2, X² = 6.69, X = 0.035). Thirteen (92.9%) had problem with law enforcement agencies (df = 1, X² = 5.29, P = 0.021). While 10 (100%) also has problem with people on account of alcohol use. The difference was statistically significant (df = 1, X² = 5.78, P = 0.016).

**Tranquilizer/Sedatives**

Twenty one (4.8%) of the 440 respondents, used tranquilizer/sedatives. Six (19.4%) started use of sedatives as early as 11-12 years of age, seven (31.8%) started the use of sedatives between the age of 13-14 years. None of the twenty one sedatives users stated their use below 10 years old and none at the age of 19 and above.

All the sedatives respondents were male, with no female sedatives respondents. Thirteen (32.5%) were of Islam faith, while 8 (11.3%) were of Christian faith.

The difference was statistically significant (df = 2, X² = 8.08, P = 0.018). Eleven (17.7%) resided in the hostel while 10 (24.4%) stayed off campus. Six (75%) spent greater time on sedatives activities as compared with 15 (14.3%) that spent lesser time on sedatives activities. Fourteen (63.6%) took sedatives and 4 other substances compared with 2 (3.3%) that took sedatives alone (df = 3, X² = 43.47, P = 0.00). Six (75%) had problem with academic activities, 9 (64.3%) had legal problem and 5 (50%) had problem with other peoples on account of sedatives usage. 10 (62.5%) had reason to increased their dosage while 12 (57.1%) tried to stop the sedatives usage with our success.

**Cocaine**

Six (1.4%) of the 440 respondents, used cocaine. All the six were Male with no Female users. Most cocaine users started the use of cocaine between 11-16 years of age. 11-
12 years of users had 4 (13%) of the 6 cocaine respondents. Three (37.5%) spent greater time cocaine related activities while the other three (2.9%) spent lesser time on cocaine activities. All the six (27.3%) used two or more drugs.

Academic performance, legal problem and behavioral problem with other people were statistically significant. Parents of 3 (27.3%) were aware their wards were involved in cocaine usage while 3 (2.9%) were not aware. Four (25%) had course to increased their usual cocaine dosage. Three (14.3%) tried to stopped without success. The other 3 (3.3%) had never try to stop the usage.

**Stimulants**

Sixteen (3.6%) of the 440 respondents, used stimulants. All the sixteen were Male. 5 (16.1%) started the use of stimulant at 11-12years of age while other 5 (22.7%) started the use at 13-14years of age. The differences was not statistically significant (df = 5, X² = 10.43, P = 0.064). All tribe except Ebira and Idoma were stimulants users. Five (62.5%) spent greater time in stimulant activities as compare with 11 (10.5%) that uses lesser time. (df = 1, X² = 16.55, P = 0.001).

Eleven (50%) used 4 or more substances, one (1.7%) used only stimulants, other 1 (9.1%) used 3 multiple drugs while 3 (15%) used stimulants and two other drugs. School performance, legal problem and problem with other people were all statistical significance. 4 (36.4%) of the parents were aware their wards were into stimulants usage while 12 (11.8%) were not aware. Six (37.5%) had reason to increased their dosage while 7 (33.3%) tried without success to stop stimulants usage.

**Hallucinogen**

Four (0.9%) of the 440 respondents, used hallucinogen. All the four were male. 3 (9.7%) had their onset of hallucinogen usage at 11-12years while one (4.8%) started the use at 15-16years of age. Three (8.8%) were of Hausa/Fulani origin while one (6.7%) was of Yoruba origin. Three (5.9%) lived off campus while one (1.6%) of hallucinogen respondents stayed in the hostel. Faculty of Engineering and Education has 2 subjects respectively. None of the hallucinogen respondents came from College of Medicine. Sourcing for hallucinogen was difficult as 2 (20%) revealed it’s easy to get it. The difference was statistically significant (df = 2, X² = 8.97, P = 0.011).

The 4 hallucinogen respondents had problem with law enforcement agencies, had problem in their academic activities while 3 (30%) had problem with other people. The 4 (25%) had course to increase their dosage while 3 (14.3%) tried to stop the usage to no effect. 3 (27.3%) parents of the 4 respondents knew about the hallucinogen usage by their wards. Hallucinogen was taken along with 4 others drugs by all the 4 hallucinogen subjects.

**Heroine**

Seven (1.6%) of the 440 respondents used heroine. Three (9.7%) started use of heroine about 11-12years, 2 (9.1%) started 13-14years of age, other 2 (7.4%) started use of heroine at 17-18years of age. None of the seven started before the age of 10years and none started at 19years and above. The difference was not statistically significant (df = 5, X² = 3.212, P = 0.667).

All the seven were male. 5 (9.8%) lived off campus while 2 (3.2%) stayed in the hostel. One (1.7%) takes only heroine as compared with six (27.3%) that takes heroine and 4 others drugs. The difference was statistically significant (df = 3, X² = 20.98, P = 0.00). School performance and legal problem were also statistically significant. 3 (37.5%) spent greater time in heroine activities while 4 (3.8%) spent lesser time.

Three (18.8%) had course to increased their dosage while 4 (19%) had tried to stop the usage without success.

**Opioid**

Twelve (2.7%) of the 440 respondents used opioid. 5 (23.8%) started the use of opioid at 15-16years of age, 4 (12.9%) started to use opioid at 11-12years while 2 (9.1%) started its’ usage at 13-14years of age. All the 12 respondents were Male. Eight (20%) were of Islam faith, 3 (4.2%) were Christian faith while one of the two Hindu used opioid. Six (9.7%) stayed in the hostel while the other 6 (11.8%) stayed off campus. Four (50%) spent greater time in opioid related activities while 8 (7.6%) spent lesser time. Eight (9.6%) revealed it’s easy to get opioid while 4 (40%) revealed its’ difficult to get it (df = 2, X = 11.5, P = 0.003). Ten (27%) sustained the drug though friends while 1 used his pocket money to sustained its’ usage.

Nine (40.9%) used opioid and 4 others drugs, none used opioid alone while 2 (18.2%) used opioid and 2 other drugs. School performance, legal/people problems were statistically significant. 6 (37.5%) had course to increased their dosage while 6 (28.6%) tried stopping it without success.

**Sniffs**

Seventeen (3.9%) of the 440 respondents, used sniff as a drug. Seven started the usage of sniff at 11-12years of age while 4 (19%) started at 15-16years of age. Two (18.2%) started the use at 19years and above. There was no statistical significance despite the difference.

All the 17 respondents were male. 9 (22.5%) were of Islam faith, while 8 (11.3%) were of Christian faith. Ten (16.1%) resided in the hostel while 1 (13.7%) stayed off campus. Eleven (26.2%) of the seven sniff respondents were from Engineering faculty, 4 (10%) from College of Medicine and 2 (6.5%) from Education faculty. The difference was statistically significant (df = 2, X² = 6.670, P = 0.036). Ten (12%) revealed it’s easy to get sniff, 5 (50%) said it difficult while 2 (10%) revealed it’s very easy to source for it. Sustainability of sniff, 10 (27%)
revealed that friends sustained them. Five parents (45.5%) of the seventeen sniff users knew about sniff usage by the wards. Four (50%) spent greater time in sniff related activities while 13 (12.4%) spent lesser time. 2 (3.3%) used sniff as their only drug while 13 (59.1%) used sniff with 4 other drugs.

7. Discussion

Alcohol

More Christian respondents used alcohol than their muslim counterpart. This report is similar to that of Silva et al (2006) that noted that belonging to a religion where drug use is clearly and explicitly condemned is associated with lower use of substances like alcohol. Islam also forbids use of alcohol hence might have accounted for the differences noted. Significant of the respondents reported that it’s easy accessing the substance. Being legally allowed in some part of the country might have accounted for easily accessibility so reported.

Tobacco

Peer pressure effect of influencing other respondents was similar to Babatunde et al (2012). Many subjects had 5years and more as the duration of usage and also used 4 or more substances as compared with one-third (1/3) of the subjects that used only tobacco.

Cannabis

Half of the subjects revealed that ‘boldness to talk’ was the reason for their use of substance while one fifth was to satisfy friends. This is similar to Adeyemo (2016) report that emphasized non medical use of cannabis.

The more drugs used, the possibility of cannabis being one of the substances is high. Cannabis is less expensive as compared with others like cocaine and its local availability as some are cultivated in some part of the country might have accounted for the popular use among multiple drug users.

Cocaine

About 1% of the respondent were involved in use of cocaine this is similar to the finding by Adelekan et al (1992) who reported that the consumption of cocaine amongst youths in rural area was quite low.

Negative effect on academic performance was similar to that reported by Tavares et al (2001). Greater time spent in its related activities might have resulted in negative effect on academic performance.

Sedative and Stimulant

Males were the only users like cocaine. Greater times were also spent in the drugs related activities. There were legal and behavioural problems associated with their use.

Hallucinogen

None of the users were from college of Medicine. Awareness of its harmful effects might have accounted for their none use by respondents from college of medicine.

Heroine

All the male users stayed off campus with many taken heroine with other drugs. Negative Academic performance and legal problem were statistically significant. Negative effect on academic performance was similar to that reported by Rob et al (1990). Less dedication to studies outside the classroom and less frequent to the school library could have a negative effect on academic activities.

Opiod

Many Opiod using subjects revealed that its easy sourcing for the drug and most revealed their friends were the source of the drug by providing it free to them.

Sniff

All users were male similar to some others studies of male predominance of use of “hard” drugs (Adeyemo 2016 & Enakpoya 2009). Many of the users like Opioid users were sustained by their friends. One third had tried to stop the usage with no success.

8. Conclusion

The findings revealed there were many factors influencing the use of drugs among students of the studied tertiary institution like other tertiary institutions in Nigeria. These institutions should therefore develop appropriate interventions including health education, social support system, counselling and referral systems to curb the menace. Parental supervision and education on dangers of drug abuse should be encouraged as earlier as possible to prevent peer pressure influence. Strict enforcement of laws involving illicit drugs by regulatory bodies like National Drug Law enforcement Agency (NDLEA) and National Food and Drug Agency Control (NAFDAC) will go in a long way addressing the problem in Nigeria.

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