

**PSYCHOACTIVE SUBSTANCE USE: A STUDY AMONG TEENAGE STUDENTS IN
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ABSTRACT

The use of psychoactive substance begins during adolescence when an individual is vulnerable to social and peer pressures. This study aims at determining the prevalence, reasons and correlates of lifetime use of psychoactive substance among adolescent students in Makurdi, North central Nigeria. A total of 412 secondary school students were recruited for the study using a stratified sampling technique. A proforma self-administered questionnaire was designed and administered to the participants. The participants range from 13 to 20 years of age, they were mostly male 52.9%, Majority are from low socio-economic class families (44.9%) and have their parents married (85.7%). The result revealed that the current use prevalence and lifetime prevalence are 28.9% and 58.5% respectively. The participants use substance for reasons which include; to obtain energy, to stay awake to read, to cope with pain, to relax with friends, to satisfy strong desire for the substances, to cope with anxiety, to feel high, to aid sleep, to feel bold and because they feel sick without using the substances. Lifetime use of psychoactive substance was found to be significantly associated with use of substance by parents, living with one parent, quarrels between parents or guardian, maltreatments from parents or guardians, problems coping with school work, living close to where substance is sold and haven engaged sex before.

KEYWORDS: Psychoactive substance. Drug use. Adolescents. Correlate. Makurdi.**INTRODUCTION**

Psychoactive substances are drugs and other substances which acts on the brain and are capable of modifying the mood, behaviors and judgement of the users.^[1] Abuse of these substances is said occur when the use is not pharmacologically necessary^[2] and it begins with acquisition or initiation of the substance in vulnerable individuals, especially youths who eventually progress through phases of increased consumption until addiction occurs.^[3] The abuse of psychoactive substance is a serious public health problem which has been on the rise with accompanying serious economic implications on the individual, families and the society.

Psychoactive substance use majorly starts during adolescence.^[4] The reason for this is not far-fetched, during this period, individuals are curious and are struggling for social acceptance from friends and the society and are therefore vulnerable to social and peer pressures.^[5-6] It has been reported that adolescents who are children of substance abusers, economically disadvantaged, abused or neglected, isolated or lonely, physically or mentally challenged, homeless, ignorant and misinformed as well as those suffering from pain and anxiety are at increased risk of substance abuse.^[7-9] Prinz *et al*, also reported that children experiencing family, school and other social and psychological problems are at risk of early psychoactive substance use.¹⁰ Other vulnerability factors include being male, late

adolescence, poor school grades, parental deprivation due to deaths, divorces, separation or discord.^[9,11]

Studies have reported increasing rate of substance use among adolescents and a reducing age of drug abusers.^[12] Among people aged 15-64 years, a prevalence of 14.4% have been reported for psychoactive substance abuse which is comparatively high in comparison to the global annual prevalence of 5.6%.^[13] A study across eight Sub-saharan Africa reported 11.7% prevalence of substance use in Nigeria and alcohol is mostly used, with a prevalence of 11.3%.^[15] Other studies conducted among students both locally and in other parts of the world have consistently reported high rates of substance abuse among the secondary school student.^[16-20]

The use of psychoactive substance has been found to have negative consequences on the health, social and economic life of the abusers. It has generally been reported to be associated with psychiatric, neurological and cardiovascular disorders.^[21-24] Another study also reported higher rates of psychiatric disorders among adolescents with current substance abuse.^[25] Association of stimulants like cocaine and MDMA has been reported to trigger serotonin syndrome,^[26] a condition associated with a high mortality. About 20-30% of liver cirrhosis, liver cancer and worldwide has been estimated to be caused by abuse of alcohol.^[7,27] Psychoactive substance has also been reported to be linked to cultism, crime, road traffic accidents, problems with kins among others.^[7,27] Substance abuse has also been identified as a serious constraint to effective teaching and learning process in the Nigerian educational system.^[7]

Literature search revealed paucity of similar study in the study area. Therefore, carrying out this study will provide information that will guide school based mental health interventions, adolescent substance use prevention programs and public health policy in the study area. As well as contributing to the body of knowledge.

AIM

The use of psychoactive substance is known to start at about the adolescent years and it creates problems which impacts negatively on the health and the entire life of humans and consequently the society. This study aims at determining the prevalence of psychoactive substance use among adolescent students as well as the types and correlates of substance use among the study population.

OBJECTIVES

1. To determine the prevalence of use of psychoactive substance among teenage students.
2. To determine the lifetime prevalence of use of psychoactive substance among teenage students.
3. To determine the correlates of use of lifetime use psychoactive substance among teenage students.

MATERIALS AND METHODS

Study Location and participants: The study was conducted among secondary school students in Makurdi, the capital city of Benue state, Nigeria. Being the capital of the state, Makurdi has significant representation of all the ethnic tribes of Benue state.

Study design: the study is a descriptive, cross-sectional study.

Study Instruments

Pro-forma: Pro-forma questionnaire is designed which comprise of 3 sections namely; section A which assess the socio-demographic characteristics the participating students, section B which assess the types of psychoactive substances used by the participants and section C which assess the reasons for psychoactive substance use among the participants.

Procedure: The secondary schools in the Makurdi Local government area was stratified into three groups (Private and public) out of which one schools each was randomly selected from each stratum. And from the selected schools, a class will be randomly selected from each of the three arms of the senior classes. The study instrument was administered to all consenting students in the selected classes in each school. Prior to the commencement of data collection, ethical approval was obtained from the ethical committee of the Benue State University Teaching Hospital and permission was also be obtained from the Benue State ministry of education.

Data analysis: Responses to the questions was presented in tables. Data analysis was carried out using the IBM-SPSS version 23 and descriptive statistics including frequency, percentages, mean and standard deviation was computed for relevant variables. Inferential statistic was computed using Pearson's product moment correlation to determine association between psychoactive substance use and other socio-demographic variables.

RESULT

Table 1, showed the socio-demographic distribution of the respondents, a total of 437 questionnaires were administered to participants but only 412 were completely filled and were therefore included in the study. The ages of these participants range between 11 – 19 years (mean = 15.45; sd = 1.55), a total of 218 (52.9%) are males while 194 (47.1%) were females. Majority of the students 216 (52.4%) are from low socio-economic class families, 185 (44.9%) belong to middle class families while 11 (2.7%) are from upper class families. A little less than a quarter (23.8%) have parents using psychoactive substance. Majority 353 (85.7%) have their parents still married while 59 (14.3%) have parents who are separated, divorced or widowed. About one-fifth (21.4%) experience frequent quarrels between their parents or guardians, a tenth (10.7%) experience maltreatments at home and 77 (18.7%) experience lack of care from parents or their guardians. Less than two-

fifth (36.7%) have problems coping with school work and 175 (42.5%) reported living close to where psychoactive substances are sold.

Table 1: Socio-demographic characteristics of respondents.

Variable	Frequency (n)	Percentage (%)	Mean (s.d)	Range
Age				
11 - 13	179	41.3	15.3(1.55) yrs	11 - 19
14 - 16	174	42.2		
17 - 19	68	16.5		
Sex				
Male	218	52.9		
Female	194	47.1		
Religion				
Christianity	394	95.6		
Islam	18	4.4		
Parent's socioeconomic status				
Lower class	216	52.4		
Middle class	185	44.9		
Upper class	11	2.7		
Parent's marital status				
Married	353	85.7		
Separated/ widowed/ divorced	59	14.3		
Parent's substance use				
Yes	98	23.8		
No	314	76.2		
Living with parents/ guardian				
Living with one parent	127	30.8		
Living with both parents	260	63.1		
Living with guardian	25	6.1		
Quarrels btw parent's/ guardian				
Yes	88	21.4		
No	324	78.6		
Maltreatments from parent's/ guardian				
Yes	44	10.7		
No	368	89.3		
Lack of care from parent/ guardian				
Yes	77	18.7		
No	335	81.3		
Problems coping with school work				
Yes	152	36.9		
No	260	63.1		
Living close to where substance is sold				
Yes	175	42.5		
No	237	57.5		

Table 2, shows the distribution of participants according to current, past and ever use of the substances. The prevalence of lifetime use of psychoactive substance

among the respondents comprising both current and past use of all the substances is 58.5% while the prevalence of current use of all psychoactive substance is 28.9%

Table 2: showing the frequency of current, past and ever use of all substances.

Substance use	Yes	No
Past use	122 (29.6%)	290 (70.4%)
Current use	119 (28.9%)	293 (71.1%)
Ever use	241 (58.5%)	171 (41.4%)

Table 3, showed the frequency of both the current and past use of individual substance among the respondents. The common currently substances among the

respondents include; coffee (18.7%), alcohol (6.8%), cannabis which includes loud and skunk (4.9%), heroine (2.4%), methamphetamine (1.9%), opioids which

comprise tramadol, codeine and pentazocine (1.7%), cocaine and diazepam are used by 1.2% of the respondents each, cigarette is use by 1.5% while tobacco is the least use substance (0.2%).

Table 3: Showing the frequency of current and past use of individual substance.

Types of substance	Frequency (n)	Percentage (%)
Alcohol		
Current use	28	6.8
Used in the past	82	19.9
Never used	302	73.3
Cannabis		
Current use	9	2.2
Used in the past	11	2.7
Never used	392	95.1
Loud		
Current use	6	1.5
Used in the past	8	1.9
Never used	398	96.6
Skunk		
Current use	5	1.2
Used in the past	7	1.7
Never used	400	97.1
Methamphetamine		
Current use	8	1.9
Used in the past	3	0.7
Never used	401	97.3
Codeine		
Current use	2	0.5
Used in the past	2	0.5
Never used	408	99.0
Tramadol		
Current use	3	0.7
Used in the past	4	1.0
Never used	405	98.3
Pentazocine		
Current use	2	0.5
Used in the past	3	0.7
Never used	407	98.8
Cigarette		
Current use	6	1.5
Used in the past	10	2.4
Never used	396	96.1
Tobacco		
Current use	1	0.2
Used in the past	3	0.7
Never used	408	99.0
Diazepam		
Current use	5	1.2
Used in the past	10	2.4
Never used	397	96.4
Coffee		
Current use	77	18.7
Used in the past	105	25.5
Never used	230	55.8
Heroin		
Current use	10	2.4
Used in the past	11	2.7
Never used	391	94.9
Cocaine		

Current use	5	1.2
Used in the past	8	1.9
Never used	399	96.8

Table 4, showed the reasons for substance use among the respondents. The commonest reasons seen in over a quarter of the respondents include to give me energy and to stay awake to read which were reported by 27.9 and 26.0% respectively, this is followed by use to cope with pain which is reported by 14.1%, about twelve percent (12.4%) use substance to relax with friends while 11.2%

use it to satisfy strong desire for the substances. About one-tenth in each case use substance to cope with anxiety (10.4%), to feel high (10.2%) and to make them sleep (9.5%). Eight and half percent use it to feel bold while about one in twenty (10.4%) use it because they feel sick without using the substances.

Table 4: Distribution of participants by the reasons for substance use.

Reasons	Frequency (n)	Percentage (%)
To make me bold	35	8.5
To cope with anxiety	43	10.4
To feel high	42	10.2
To stay awake to read	107	26.0
To cope with pain	58	14.1
To give me energy	115	27.9
To make me sleep	39	9.5
To relax while I am with my friends	51	12.4
To satisfy my strong desire for it	46	11.2
I feel sick if I don't take it	21	5.1

Table 5: showed correlation between lifetime use of psychoactive substance and other variables. A Pearson's product moment correlation was conducted to evaluate the relationship between substance use and socio-demographic characteristic of the participants. The result showed that the lifetime use of substance is found to be positively associated with use of substance by parents

($r(410) = .228, p = .000$), living with one parent ($r(410) = .098, p = .046$), quarrels between parents or guardians ($r(410) = .114, p = .020$), maltreatments from parents or guardians ($r(410) = .116, p = .019$), problems coping with school work ($r(410) = .103, p = .037$), living close to where substance is sold ($r(410) = .126, p = .011$) and haven engaged sex before ($r(410) = .126, p = .011$).

Table 5: Correlation between substance use and socio-demographic variables.

Variable	Correlation Coefficient(r)	P-value
Age	0.058	0.242
Sex	0.084	0.088
Parent's socio-economic status	0.080	0.106
Parent's marital status	0.005	0.924
Parent substance use	0.228	0.000
Living with one parent	0.098	0.046
Living with both parents	0.072	0.143
Quarrels between parents or guardians	0.114	0.020
Maltreatments from parents or guardians	0.116	0.019
Problems coping with school work	0.103	0.037
Living close to where substance is sold	0.126	0.011
Have you had sex before	0.131	0.008

DISCUSSION

This study examining substance use among teenage students in Makurdi, Nigeria revealed 28.9% and 58.5% as the current use and lifetime prevalence of psychoactive substance among teenage students. The finding is similar to 30.5% and 52.1% reported in a south-western Nigerian study (Atoyebi)^[28] as well as a range of 0.4 to 34.9% for current use prevalence and 0.8 to 63.5% for lifetime use prevalence (Manyike)^[29]

reported in Eastern Nigeria. It however, contrast with another Nigerian study that reported a current use and lifetime prevalence of 11.7% and 17.3% respectively (Obadeji)^[30], this difference may be explained by the larger number of substances investigated in this current study. An internet-based survey in Europe reported a lifetime prevalence of 65.5% for substance use among students which is comparable to this study.^[18] (Perino) The current use prevalence of 28.9% is also comparable

to three other Nigerian studies that reported current use prevalence of 27.5% (**Johnson**)^[31] 30.5% (**Atoyebi**)^[28] and 33.8% (**Ekpeyong**).^[32] The current use prevalence of 28.9% contrast with 65.5% reported in another study from south-south, Nigeria (**Chukwujekwu**)^[33] and this can be explained by the fact the study was conducted among university students. It also contrasts with 8.8% reported in Egypt (**Negm**),^[34] a difference that can be explained by strict religious and legal prohibitions on substance use.

The pattern of substance use in this study which showed coffee and alcohol are the most commonly used substances with current use prevalence of 18.7% and 6.8% respectively is consistent with the finding in Benin city, Nigeria (**Adeyemo FO**)^[35] even though, higher current use and lifetime prevalence reported in the study which can be attributed the participants being university students. The report that alcohol is one of the mostly used psychoactive substance among adolescent students is consistent with reports for studies and reviews within and outside Nigeria^[36-42] (**Dumbili, Olawole-Isaac, Nebhinani, Anyanwu, Yisa, Idowu, Lawoyin**).

The most pronounced reasons for the use of psychoactive substance among the respondents include; to obtain energy and to stay awake to read which were widely reported in previous studies^[5,31,43-44] (**Oshodi, Johnson, Kumburi, Afolabi**), these are followed by “to cope with pain” also reported by Nawi *et al.*^[45] (**Nawi**). Respondents also use substance to relax with friends as reported previously by Umukoro *et al.*^[46] (**Umukoro**). Also, as reported by previous studies,^[5,43,47] (**Oshodi, Kumburi, Govoni**) respondents use substance to satisfy strong desire for the substance and to cope with anxiety. Other reasons found in this study include to feel high^[44,48] as reported previously,^{44,48} (**Afolabi, Maishanu**), to aid sleep and to be bold, which were also previously reported^[31,48] (**Johnson, Maishanu**) and lastly they use substance because they feel sick if they don't take it.

The correlates of psychoactive substance use in the current study include use of substance by parents which has been well reported in previous studies^[28,31,49-52] (**Atoyebi, Johnson, Attah, Akanni, Okogbenin, Mekuria**), also, living with a single parent and quarrels between parents or guardian revealed as correlates in this study have also been reported previously^[52-54] (**Mekuria, Nenadi, Igwe**), other correlates found in this study include maltreatment from parent or guardian which was previously reported by Nawi *et al.*^[45] (**Nawi**), problems coping with school work which was also reported by Johnson *et al.*^[31] (**Johnson**), as well as living close to where substance is sold.

CONCLUSION

The study revealed that the use of psychoactive substance is common among adolescents in the study area with caffeine and alcohol being the mostly used

substance. Several factors associated with significant association with substance use include; parents substance use, quarrels between parents or guardian, living with a single parent, living close to where substance is sold.

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SOURCES OF SUPPORT/ CONFLICT OF INTEREST

This study had no external source of support and there is no conflict of interest by any of the researchers.

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APPENDIX

INFORMED CONSENT FORM FOR PARTICIPANTS

Dear Respondent,

You are being requested to participate in a study titled “**PSYCHOACTIVE SUBSTANCE USE: A STUDY AMONG TEENAGE STUDENTS IN MAKURDI, NIGERIA.**”. The purpose of the study is to find out how common is the use of psychoactive substance among teenage students in Makurdi, Nigeria as well as the reasons for its use and factors associated with its use. This study will help in the planning of awareness campaign against the use of psychoactive substances and will also guide policy formulation.

All information obtained from you will be treated with strict confidentiality. Your name is not requested in the questionnaire and no one will know the particular questionnaire you filled. You are therefore assured that you name will not be used on any report that will come out of the study, but the data may be shared with other researchers for the purpose of promoting the course of medical knowledge.

Your participation in the study is voluntary and you may withdraw at any time. Your decision not to participate in the study will affect you in anyway.

If the explanations are clearer to you and you decide to participate in the study, please sign below.

Signature/Thumbprint of participant Date.....

Signature of witness Date

QUESTIONNAIRES

The information in this questionnaire is strictly for educational purposes. Absolute anonymity and confidentiality is guaranteed. Please read the questions carefully and answer them with all honesty as your sincere response will be of great benefit to the success of the study.

Thank you.

PRO FORMA QUESTIONNAIRE

Section A: Socio-demography

1. Age
2. Sex (i). Male [] (ii). Female []
3. Religion (i). Christianity [] (ii). Islam [] (iii). Others (specify).....
4. Class (i). SSS 1 [] (ii). SSS 2 [] (iii). SSS 3 []
5. Parents socio-economic status (i). Lower [] (ii). Middle [] (iii). Upper []
6. Parents marital status (i). Married [] (ii). Separated [] (iii). Divorced [] (iv) Widowed []
7. Does any of your parent use any of the substances listed in **section B**?
(I). Yes [] (ii). No []
8. Do you live with one of your parent? (i). Yes [] (ii). No []
9. Are you living with both of your parents? (i). Yes [] (ii). No []
10. Do you experience any of the following at home?
 - a. Quarrels between parents/ family (i). Yes [] (ii). No []
 - b. Maltreatment from parents/ care giver (i). Yes [] (ii). No []
 - c. Lack of care from your parent (i). Yes [] (ii). No []
11. Do you have problems coping with school work? (i). Yes [] (ii). No []
12. Do you live close to where they sell the substances? (i). Yes [] (ii). No []

Section B: Which of the following psychoactive substances have you used?

S/No	Psychoactive Substance	Never used	Used in the past	Current use
1	Alcohol/ Bitters/ Burukutu			
2	Cannabis (Igbo)			
3	Loud			
4	Skunk (SK)			
S/No	Psychoactive Substance	Never used	Used in the past	Current use
5	Methamphetamine (Ice)			
6	Codeine			
7	Tramadol			
8	Pentazocine			
9	Cigarette			
10	Tobacco			
11	Diazepam (Rouche)			
12	Coffee			
13	Energy drinks			

14	Heroin			
15	Cocaine/ Crack			

Section C: What are your reasons for using psychoactive substance?

S/No	Reasons	Yes	No
1	To make me bold		
2	To cope with anxiety		
3	To make me feel high		
4	To stay awake to read my books		
5	To cope with pain		
6	To give me energy		
7	To make me sleep		
8	To relax while I am with my friends		
9	I usually have strong desire to take it		
10	I feel sick if I don't take it		