



## THE SOCIETY

## MENACE OF DRUG AND SUBSTANCE ABUSE PROBLEMS TO ADOLESCENTS AND

**\*ANASIN SALISU MUHAMMA; \*\*MUSA  
BABA ABUBAKAR; \*\*ADAM MUHAMMAD  
EL-HAMEES; & \*\*ADAMU SALEH**

*\*Registry Dept. Federal Polytechnic, Bauchi.*

*\*\*Dept. General Studies, School Of General  
Studies. Federal Polytechnic, Bauchi.*

### Abstract

**D**rugs or substance abuse continues to be the major risk behaviour among youth and adolescents, with physical and mental health complications. Despite the known risks associated with the drugs, adolescents continue using these drugs. This paper reveals the prevalence of drug abuse among adolescent's in Nigeria societies, problems associated with drugs abuse and reasons why adolescents are vulnerable to drugs abuse. Drug abuse causes a lot of risk among the adolescents; it results to gang formation, armed robbery, mental illness and cultism. Studies revealed that most of the drug

addicts started smoking from their young age. As they grow older they seek new thrills and gradually go into hard drugs. There was an

### KEYWORDS:

Adolescents,  
Substance abuse,  
Problem, Society  
and Prevention.

indication that 65 percent of high school students used drugs to have good time, 54 percent wanted to experiment to see what it is like, 20–40 percent used it to alter their moods. It concludes by prescribing some ways of curbing the menace arising from drug abuse and a little history of drug.

### INTRODUCTION

**D**rug abuse is rapidly growing global problem. (Lakhanpal, Agnihotri, 2007; United Nations Office of Drugs and Crime, 2007; (UNODC) Abudu, 2008). The problem of the drug abuse places a significant threat to the social, health, economic fabrics of the families,

society and the entire nations. (Giade, 2012; Oshodi, Aina & Onajole, 2010). Almost every country in the world is affected from one or more drug being abused by its citizen's. (UNODC, 2007) the increased of drug abuse globally has brought problems such as increase in violence and crimes, increase in Hepatitis B and C virus, increase in HIV/AIDS diseases, collapse of the veins and collapse in the social structure. (UNODC, 2007; Oshodi, Aina, & Onajole, 2010).

Horrible youthful activities are widespread in Nigeria to the extent that they have been giving a lot of concern to the society, government and other stake holders in Nigeria. In primary schools, peers engage in organized crimes and disrupt normal academic programs. In secondary schools and most Nigerian universities, the activities of secret cults are known to have been source of threat to lives and property, also the societies are in danger. Outside the campuses, a lot of ritual killings are taking place. (Abudu, 2008; Oshodi, Aina, & Onajole, 2010). The impact of drug abuse among Nigerian adolescents has been a feature of a morally bankrupt, corrupt and wasted generation and loss of our societal values and ideals. The situation now appears to be such that no one can argue ignorance of what is happening (Abudu, 2008). We cannot sit and illegitimately pretend on the menace of drug abuse among our adolescents. According to Giade, (2011), any nation being used by drug barons as a transit route has the potentials of becoming a drugs abuse consumer's country, drugs abuse threaten, the security of every nation, tearing apart our societies, spawning crime, spreading diseases such as aids, and killing our youths and they future”.

#### **HISTORY OF DRUG DISCOVERY:**

Drug discovery and development has a long history and dates back to the early days of human civilization. In those ancient times, drugs were not just used for physical remedies but were also associated with religious and spiritual healing. Sages or religious leaders were often the administrators of drugs. The early drugs or folk medicines were derived mainly from plant products and supplemented by animals, materials and minerals. These drugs were most probably discovered through a combination of trial and error experimentation and observation of ingesting such products. Although these folk medicines probably

originated independently in different civilizations, there are numbers of similarities, for example, in the use of the same herbs for treating similar diseases, this is likely to be a contribution by ancient traders, who in their travels might have assisted the spread of medical knowledge. Folk medicines were the only available treatments until recent times.

The dramatic increase in the complexity of drug research is enforcing changes in the institutional basis of this interdisciplinary endeavour. The biotech industry is establishing itself as the discovery arm of the pharmaceutical industry. In bridging the gap between academia and large pharmaceutical companies, the biotech arms have been effective instruments of technology transfer. As an interdisciplinary endeavour with an industrial base, drug research is not much older than a century.

Drug research, as we know it today, began its career when chemistry had reached a degree of maturity that allowed its principles and methods to be applied to problems outside of chemistry itself and when pharmacology had become a well-defined scientific discipline in its own right. By 1870, some of the essential foundations of chemical theory had been laid. Avogadro's atomic hypothesis had been confirmed and a periodic table of elements established. Chemistry had developed a theory that allowed it to organize the elements according to their atomic weight and valence. There was also a theory of acids and bases. In 1865, August Kekule' formulated his pioneering theory on the structure of aromatic organic molecules. This benzene theory gave a decisive impulse to research on coal-tar derivatives, particularly dyes. In turn, the evolution of dye chemistry had a profound influence on medicine. The selective affinity of dyes for biological tissues led Paul Ehrlich a medical student in the laboratory of the anatomist, Waldeyer (between 1872 & 1874) at the University of Strasbourg, to postulate the existence of "chemoreceptors." Ehrlich later argued that certain chemoreceptors on parasites, microorganisms, and cancer cells would be different from analogous structures in host tissues, and that these differences could be exploited therapeutically. It was the birth of chemotherapy, a particular type of drug therapy, that in the course of the 20th century led to unprecedented therapeutic triumphs. Analytical chemistry, in particular the isolation and purification of the active ingredients of medicinal plants, also demonstrated its value for medicine in the 19th century.

## **OVERVIEW**

Adolescents or gender are diverse group with many roles and responsibilities in life when the developing individual attains the skills and attributes necessary to become a productive and reproductive adult. Nearly all cultures recognise a phase in life when society acknowledges these emerging capacities of young people. What varies considerably by culture and context is whether the passage from childhood to adulthood is a direct and short passage, or whether there is a prolonged adolescents marked by a choice of identities and roles. While most of the world's adolescents make it through the period with no major problems, even those adolescents who have no significant personal problems or substance abuse, needs have normative stresses and needs for help, support and orientation associated with making the transition from childhood to adulthood visible. In some parts of the world, research suggests that the normative tasks of adolescents are becoming more difficult in light of reduced social control by families and Communities, as for the use of substance abuse and violence, more varied opportunities (leading to greater confusion), increased individualism and declining importance of traditional cultural norms (Frydenberg, 1997). Programmes in South-East Asia consulted for this document reported that changes in the social structure and the economy including increases in educational attainment, increasing urbanization and increased modern-sector employment opportunities for young women have led to a weakening of traditional family support. These changes are often cited as the causes of increasing rates of psychological problems such as family crises, emotional identity crises and substance abuse and violence. In addition, some adolescents have expanding normative needs for assistance in continuing their education and more diversified job training, and enhanced services related to sexuality and reproductive health marriage and earlier sexual activity. Around the world, adolescent is a time of opportunities as well as vulnerabilities to risk-associated behaviours that can have lifelong consequences.

## **METHODOLOGY**

The study is based on the data collected from NDLEA, the important body of psychological research has demonstrated that drinking or

substance abuse creates the expectation among some drinkers that they will act aggressively as a result of their consumption of alcohol (Bushman & Cooper, 1990; Lang, Goeckner, Adesso, & Marlatt, 1975; Taylor & Gammon, 1975). The deviance disavowal perspective suggests either that alcohol is consumed before acting violently and is used as an excuse for the violence, or that alcohol use is offered as an excuse after the fact in an attempt to deflect personal responsibility for the violence (Colernan & Straus, 1983; Collins & Messerschmidt, 1993). Expectancy effects and deviance disavowal further complicate efforts to untangle an already complicated etiological picture.

### **Drug Abuse**

Drug abuse may be defined as the “arbitrary” over dependence or misuse of one particular drug with or without a prior medical diagnosis from qualified health practitioners. (Lakhanpal, & Agnihotri, 2007). (Oluremi, 2012), Drug Abuse is the harmful use of mind altering drugs. It added that the term usually refers to problem with illegal drugs, which also include harmful use of legal prescription drugs, Such as in self-medication.

Majority of the Nigerian adolescents ignorantly depend on one form of drug or the other for their various daily activities—social, educational, political, moral etc. Such drugs include: Tobacco, Indian hemp, cocaine, morphine, Heroin, Alcohol, ephedrine, Madras, Caffeine, Glue, Barbiturates, and Amphetamines. (Oshikoya and Alli, 2006; Oshodi, Aina, Onajole, 2010) in their studies on perception of Drug Abuse amongst Nigerian undergraduates identified, dependence and addiction as one of the major consequence of drug abuse in our society today, characterized by compulsive drug craving seeking behaviours are use that persist even in the face of negative consequences. These changes are maladaptive and inappropriate to the social or environmental setting, therefore, may place the individual at risk of harm. Drug abuse among youth's and adolescents should be a matter of concern to all Nigerians, especially the society, government, school heads, religious leaders, groups and other NGOs.

Experiment with drugs during adolescents (11–25 years) is common. At this age, they try so many new things. They use drugs for many reasons, including curiosity and desire to find out the effectiveness of a particular

drug, to feels good, to reduce stress, or to feel grown up. Using alcohol and tobacco at a young age increase the risk of using other drugs later. In one of the WHO's and the World Heart Foundation's data, posit that in Nigeria, 22.1 percent of school youth age between 12 to 17 years use tobacco. The Government of Nigeria seems to lose sight of its responsibilities, though it claims that tobacco should be regulated in a market oriented frame work, which strikes an optimal balance and the need to ensure healthy work force. The fear is that adolescents are lured into early death from Cardio Vascular diseases (CVD), lung cancer and other tobacco related diseases. (Abudu, 2008; Giade, 2011). Already, Nigerian adolescents are being offered cigarettes through promotions and musical concerts. Some teens will experiment and stop, or continue to use occasionally without significant problems. While others will develop addiction, moving on to more dangerous and hard drugs and causing considerable harm to themselves and the society at large. Despite the effort of many concerned individuals and organizations, to curb this menace, many individuals still present these drugs as though they are harmless. They give them slogans such as "for greatness" "for brighter life"

Reports from all over the world about this menace of drug abuse are severe. The British officer for National Statistics reports that 12 percent of pupils aged (11–15) had used drugs. Amphetamines are used among student (Oshodi, Aina, & Onajole, 2010) Barbiturates are used by adolescents with suicidal tendencies rather than for addictive purpose. Madras abuse once reached epidemic proportions among students (Abudu, 2008). However, cannabis (marijuana) appears to be the most commonly abused drug by the adolescents. (UNODC, 2011). Drugs are everywhere in our cities in Nigeria, motor parks, Street corners, joints on campuses, uncompleted buildings, under flyovers. From a survey of Ring Road outlets in Benin City, Ajegule in Lagos, Mabushi in Abuja, under flyover in Onitsha will astonish you of the number of youths involved in the intake of cannabis and other drugs (Abudu 2008; Oshodi, Aina & Onajole, 2010). Here in Plateau State, violence conflict is a company by the use of Drug, most especially the youth and adolescents.

### Theories of Drug Abuse:

The theories of drug abuse indicate that some individuals depend on certain drugs for their survival due to the number of factors. The main emphasis of the theories of drug abuse is that people have their own reasons for depending on a particular type of drug or the other. Such reasons, by Eze and Omeje (1999) in Oluremi, (2012) are explained by the following theories.

- A. **Socio-cultural Theory of Drug Abuse:** This theory maintained that drug abuse is determined by socio-cultural values of the people. For example, certain cultures permit the consumption of alcohol and marijuana, while other cultures do not. Among the tribes in Nigeria for example, Edo, Ijaw, Igbo, Ibibio, Urhobo, Itsekiri and Yoruba, alcohol is used in cultural activities. In the northern part of Nigeria any form of drug is not allowed.
- B. **Personality Theory of Drug Abuse:** The major emphasis of this theory is that there are certain qualities of characteristics in the individuals that abuse drugs. Such personality characteristics are in ability to delay satisfaction, low tolerance for frustration, poor coping ability and low self-esteem, poor impulse control and high emotional dependence on other people. People with these personality characteristics find it difficult to abstain from drug abuse.
- C. **Biological Theory of Drug Abuse:** The theory maintains that drug abuse is determined by the individual's biological or genetic factors which make them vulnerable to drug addiction.
- D. **Learning Theory of Drug Abuse:** The theory maintains that usage or dependence of drugs occurs as a result of learning. The learning could be by the means of instrumental learning, conditional learning, or social learning.

### Prevalence Rate of Drug Abuse in Nigeria

From the record of drugs abuse in Nigeria, the Northwest has statistics of 37.47 percent of the drug victims in the country, while the Southwest has been rated second with 17.32 percent, the south-East was being rated third with 13.5 percent, North-central has 11.71 percent, while the North-east zone has 8.54 percent of the drug users in the country

(Akannam, 2008). In Nigeria, the estimated life time consumption of cannabis among the population is 10.8 percent, followed by psychotropic substances like benzodiazepines and amphetamine-type stimulants 10.6 percent, heroin 1.6 percent, and cocaine 1.4 percent, in both urban and rural areas. Drugs abuse appears to be common among males with 94.2 percent than females 5.8 percent, and the age of first use is 10 to 29 years. The use of volatile organic solvents is 0.53 percent, and is widely spread among the street children, in school youths and women. Multiple drug use happens nationwide with 7.88 percent to varying degree (UNODC, 2007).

### **Causes of Young People Vulnerability to Drug Abuse**

Studies have revealed that most of the drug addicts started smoking from their youths. As they grow older they seek new thrills and gradually go into hard drug abuse, (Oshodi, Aina & Onajole, 2010; Igwe, et al., 2009). A nationwide survey of high school students reported that 65 percent used drugs to have good time with their friends 54 percent wanted to experiment to see what it is like, 20 percent to 40 percent used it to alter their moods, to feel good, to relax, to relieve tension and to overcome boredom and problems (Abudu, 2008).

No single factor could be defined as solely responsible for the abuse of drugs but the following are some of the causes of young people vulnerable to drug abuse in Nigeria. (Oshodi, Aina, & Onajole, 2010; Igwe, et al., 2009; Abudu, 2008; Oluremi, 2012; Desalu, et al., 2010; Ajibulu, 2011; Henry, Smith, & Caldwell, 2006).

#### **A. Curiosity and Desire to find out the Effectiveness of a particular drug:**

Curiosity to experiment the unknown facts about drugs thus motivates youths into drug use. The first experience in drug abuse produces a state of arousal such as happiness and pleasure which in turn motivate them to continue. Some time, youths takes drugs in order to find out their effectiveness of a particular drug and if they find out that the drug is effective, they continue using such drugs.

**B. Peer group Influence:** Peer group pressure plays a major role in influencing many youths into drug usage. This is because peer pressure is a fact of teenage and youth's life. In Nigeria, and other parts of the

world, one may not enjoy the company of others unless he conforms to their norms.

**C. Environment:** Many young people live in communities which suffer from multiple deprivations, with high unemployment, low quality housing and where the surrounding infra-structure of local services is splintered and poorly resourced. In such communities, drug supply and use often, thrive as an alternative economy often controlled by powerful criminal groups. As well as any use that might be associated with the stress and boredom of living in such communities, young people with poor job prospects recognise the financial advantages and the status achievable through the business of small scale supply of drugs.

**D. Promotion and Availability:** There is considerable pressure to use legal substances. Alcohol and pain relieving drugs are regularly advertised on television. The advertising of tobacco products is now banned, but research from Strathclyde University published by Cancer Research concluded that cigarette advertising did encourage young people to start smoking and reinforced the habit among existing smokers. Despite legislation, children and adolescents have no problems obtaining alcohol and tobacco from any number of retail outlets. Breweries refurbish pubs with young people in mind, bringing in music, games, more sophisticated decor and so on while the general acceptance of these drugs is maintained through sports sponsorship, promotions and other marketing strategies.

**E. Enjoyment:** Despite all the concerns about illicit drug use and the attendant lifestyle by young people, it is probably still the case that the lives of most, young people are centred on school, home and employment and that most drug use is restricted to the use of tobacco and alcohol. They may adopt the demeanour, fashion and slang of a particular subculture including the occasional or experimental use of illegal drugs without necessarily adopting the lifestyle. Even so, the evidence of drug use within youth culture suggests that the experience of substances is often pleasurable rather than negative and damaging. So probably the main reason why young people take drugs is that they enjoy themselves.

**F. Lack of Parental Supervision:** Many parents have no time to supervise their sons and daughters. Some parents have little or no interaction with

family members, while others put pressure on their children to pass exams or perform better in their studies. These problems initialize and increases drug usage.

**G. Socio-economic Status of the Parents:** Socio-economic status of the parents, entails direct costs which are very important to families; particularly this is related to every aspects of the family's life and caring to children. The implications of family relationship on students have remained an alarming factor to the total life of the children by implication the socio-economic status of the parents may influences adolescents to abuse or not to abuse drugs even if the parents have very low income, low income average, high, or very high income.

**H. Self – medication:** Self-medication create primary psychological disorders.

**I. Pathological family background:** Broken homes, illegitimate relationships, alcoholic parents or parent's involvement in antisocial and illegal activities.

**J. Ignorance:** The adolescents or youth are ignorance for the dangers of illegal drug use.

### **Consequences;**

The various consequences of drug addiction or drug abuse are so devastating and very shameful to the extent that both the nation and international organizations all over the world are also worried about the spread of this scourge among the youths and adolescents and some of these consequences includes: Mental disorder, drop out from school, cultism, social violence, internet frauds, gang formation, destructions of normal academic activities, armed robbery, 419 syndrome, social miscreants (area boys and girls) lawlessness among youths, lack of respect for elders, rape, instant death and wasting of precious and innocent lives and many more and loss of senses.

### **How to Curb the Menace**

We are aware that government on its own has tried in Nigeria to curtail, eradicate or discourage the use, sale, trafficking and recycling of illegal drugs by promulgating various decrees against such drug use. There is the popular Anti-narcotic, Decree under which the NDLEA was set up. In

1989, the Federal Military Government enacted Decree 48 now Cap N30 Law of the federation establishing the National Drug Law Enforcement Agency. The Agency is charged with the dual responsibility of reducing the supply and demand for drugs. The Federal Government of Nigeria appreciates the fact that supply reduction efforts alone cannot solve the drug problem, hence the emphasis on Demand Reduction. The Drug Reduction Directorate is charge with the responsibility of reducing the demand for illicit drugs.

At the inception of the Agency, the Drug Demand Reduction Directorate was known and referred to as the Counselling Unit. This former name was considered inappropriate as it referred to just an aspect of the functions and constitutional responsibility of the Directorate. Consequent upon this, the Units' name was changed to Drug Demand Reduction Directorate encompassing all the activities of the Directorate. The Drug Demand Reduction Directorate is charged with the responsibility of reducing the demand for illegal drugs. To achieve these objectives, the Drug Reduction Directorate is divided into three

**Units namely.**

**A. Drug Abuse prevention on Education**

This is geared towards providing factual information and learning experiences on drug problems. To this end, NDLEA in conjunction with NERDC has concluded the development of preventive drug education curriculum and infused its content into relevant school subjects at various levels of learning (Primary, Secondary and Tertiary) while the implementation is in progress. The essence of preventive education in schools is to encourage students to recognize the benefits of adopting drug free and healthy life style and to provide them with necessary skills to be able to resist pressures to take drugs. Besides, the NDLEA has launched the formation of drug free clubs in Secondary School in Nigeria so as to promote alternative activities to drug involvement by students.

**B. Public Awareness Campaigns**

This approach aims at involving community groups in drug abuse and trafficking prevention. It involves the use of traditional rulers, community/opinion leaders, youth leaders, religious leaders, professional bodies, voluntary organizations, NGOs etc, to campaign

against drug abuse and illicit drug trafficking. Community resources are mobilized towards prevention and social integration programs.

### **C. Treatment and Rehabilitation**

It is in line with the statutory responsibility of the Agency that the Treatment and Rehabilitation unit. Drug Demand Reduction Directorate was created. Drug Rehabilitation is predicated on the need to provide help to identified as drug dependent persons. Drug Dependency is a public health problem that impacts negatively on the social multiple levels. There are four major Treatment/rehabilitation methods in use in Nigeria, namely:

- I. Non-Governmental Based Treatment/Rehabilitation
- II. Community Based Treatment/Rehabilitation
- III. Hospital based Treatment/Rehabilitation
- IV. Religious/Faith Based Treatment / Rehabilitation

### **Research and non-Governmental Organization Liaison**

Researches are carried out on the trends, patterns and prevalence of drug abuse problems among different target groups. These researches include school survey, hospital survey, trafficking survey and others. Data is collected from suspected traffickers in NDLEA pre-trial cells and drug abusers on admission in treatment centers across the country. The data collated is analyzed and produced as annual research report on drug abuse and trafficking. These reports are distributed to relevant Governmental, Non-Governmental, International Organizations, Corporate bodies and Individuals involved in drug abuse and trafficking prevention in Nigeria. (National Drug Law Enforcement Agency 2009).

### **Conclusion**

The abuse of drugs and other substances constitutes one of the most important risk behaviour among our youth's and adolescents in Nigeria. All Nigerians have accepted that drug abuse is undesirable feature of our culture, and it is also important to emphasize the fact that majority of our youths and adolescents come from different backgrounds and that the drug use and addiction is not restricted to any one social class.

### **Recommendations**

Based on the discussions the following recommendations were offered.

- A.** Parents should sincerely re-orient their children on the dangers of drug abuse on their health and others, since charity, they say begin at home.
- B.** Parents should provide for their Children or adolescents the following;
- i. Good education on religious matters, which would enable them to have good Moral and respect for elders and religious leaders for the betterment to the society and Nation in General.
  - ii. Western Education; to enable them to understand how to interact and associate with other cultures and respect other form of worship, also to enable them to serve the Nation better.
  - iii. To Learn Hand Work or any recommendable Business, to enable them to earn with their Hard Labour. If the parents cannot find work for them, they would find it for themselves, which it may not be the best for the parents, society and Nation in General.
- C.** National Drug Law Enforcement Agency must also intensify their anti-drug campaigns in order to have a drug free society with a special focus on the youths and adolescents.
- D.** The Ministry of Education (Federal and State) must add to their curricular a Drug-Education for both the primary and post primary schools, along with lectures, seminars, rallies, and film shows for the youth's and adolescents on the adverse effects of drug abuse.
- E.** All the three tiers of Government in Nigeria, the NGOs and concerned individuals must be made possible, concerted effort in curbing the spread of the scourge of drug abuse among our youth's and adolescents through awareness campaign programs.

## **References**

- Abudu, R. V. (2008). Young People and Drugs Abuse: Biennial International Conference on alcohol, drugs and society in africa, Abuja, Nigeria. Between 23rd-25th, 2008.

- Ajibulu, E. (2011). Eradicating Drug Abuse in Nigeria- How feasible? Retrieved May 24, 2012 from <http://www.modernghana.com/news/337520/1/eradicating-drug-abuse-in-nigeriahow-feasible.html>.
- Akannam, T. (2008). North-West Rank Highest in Drug Addiction. Nigerian Drug Statistics by Zone. Retrieved May 5, 2012. from <http://www.nairaland.com/203955/nigerian-drug-statistics-zone>.
- Desalu, O. O., et al (2010), Smokeless Tobacco use in adult Nigerian population. *Journal of clinical practice*, 13(4), 382 – 387.
- Gary Barker, Ph.D. (2007), Adolescents, social support and help-seeking behaviour Department of Child and Adolescent Health and Development Institute promundo Brazil world health organisation.
- Giade, A. (2011), How Nigeria's Latest Drug Abuse Defies Legislat. *Daily Trust Newspaper*. Retrieved from <http://www.dailytrust.com.ng/daily/old/index.php/feature/42852-how-nigerias-latest-drug-abusedefies-legislation>.
- Hamisu M. et al (2014), Adolescent's and Drugs Abuse in Nigeria, *Journal of Biology, Agriculture and Healthcare* [www.iiste.org](http://www.iiste.org) ISSN 2224-3208.
- Henry, K. L., et al (2007), Deterioration of academic achievement and marijuana use onset among rural adolescents. *Journal Health education research*, 22(3), 372-384.
- Igwe, W. C., et al (2009); Socio-Demographic Correlates of Psychoactive Substance Abuse Among Secondary School Students in Enugu, Nigeria. *European Journal of Social Science*, 12(2), 277 – 283.
- John Wiley and Sons, Inc. (2009). History of Drug discovery and Development, from discovery approval, second Edition, by Rick Ng Copyright.
- Jurgen Drews (2000), Drug Discovery: A Historical Perspective [www.sciencemag.org](http://www.sciencemag.org) science volume, 287.
- James J. C. et al (2002). Linkage of domestic violence and substance abuse services National Institute of Justice.
- Lakhanpal, P. & Agnihotri, A., K. (2007). Drug Abuse an International Problem: A short Review with Special reference to African Continent. *Journal of Medicine and Toxicology*, 1(1), 1-11.
- National Drug Law Enforcement Agency. (2009). Drug Free Club. Retrived from <http://www.ndlea.gov.ng/v1/?q=content/drug-free-club>.
- Oluremi, D. F. (2012), Drug Abuse among Nigerian Adolescents strategies for counselling. *Journal of International Social Research*. 5(20), 342 – 347.
- Oshodi, O. Y., Aina, O. F., and Onajole, A. T. (2010). Substance use among secondary school students in an urban setting in Nigeria: prevalence and associated factors. *African journal of psychiatry*, 13(1), 52 – 57.
- Oshikoya, K. A., & Alli, A. (2006). Perception of Drug Abuse Amongst Nigerian Undergraduates. *World Journal of Medical Sciences*, 1(2), 133-139.
- United Nations Office on Drugs and Crime. (2007). Drug Abuse and Drug Dependence Treatment Situation, in Nigeria. According to UNODC data for the year 2007. Available at [http://www.unodc.org/docs/treatment/CoPro/Web\\_Nigeria.pdf](http://www.unodc.org/docs/treatment/CoPro/Web_Nigeria.pdf).
- United Nations Office on Drugs and Crimes. (2011). World Drug Report. Austria. No.: ISBN 978-92-1-148262-1, 272. Retrieved from [http://www.unodc.org/documents/data-andanalysis/WDR2011/World\\_Drug\\_Report\\_2011\\_ebook.pdf](http://www.unodc.org/documents/data-andanalysis/WDR2011/World_Drug_Report_2011_ebook.pdf).