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Socio Demographic Determinants of Substance Abuse among Secondary School Students in Shongom Local Government Area, Gombe State

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Abstract

The purpose of the study was to determine the socio-demographic determinants and preventive measures of substance abuse among secondary school students in Shongom LGA, Gombe State. In order to achieve this purpose, seven specific objectives were formulated and corresponding research questions were posed for the study. Four null hypotheses were postulated to guide the study. The correlation research design was adopted for the study. The population for the study comprised of 2618 secondary school students in Shongom LGA, Gombe State. Taro Yamane formula for computing sample size was utilized to draw the sample size of 347. The instrument used for data collection in the study were Socio-demography Determinants of Substance Abuse Questionnaire referred to as SDSAQ adapted from the Youth Risk Behaviour Survey Questionnaire. The face validity of the instruments was done by three experts and reliability establish using split half method and Cronbachs Alpha statistic was used to determine the reliability of SDSAQ. The result of the reliability coefficient of 0.88 and 0.86 was obtained for SDSAQ respectively. The researcher with the help of research assistants distributed a total of 347 copies of SDSAQ to secondary school students Out of number 347 (100%) valid copies were used for analysis. The data collected was analysed using frequency and Pearson product moment correlation co-efficient and the hypotheses were tested with regression analysis. Findings of the study was the commonly abused substances by secondary school students in Shongom LGA, Gombe State were cannabinoid with (24.1%) and alcohol with (23.3%). Also, the proportion of secondary school students who abused substances in Shongom LGA, Gombe State shows that 17% abused alcohol, 9.5% abused tobacco and 9.7% abused prescription drugs and there was low relationship between family status and substance abuse among secondary school students($r = 0.213$; $P = 0.036$). The following recommendations were mad that teachers in high schools and colleges, parents, mass-media and other concerned people should teach students about the health and social problems associated with substance abuse, Parents should sincerely re-orient their children on the dangers of drugs on their health and others since charity begin at home and Ministry of health and ministry of education and other health parastatal should do more in educational campaigns on the negative consequences of substance abuse.

Keywords: *Socio- demographic, Determinants, Substance abuse, Secondary school, Students*

Introduction

The rate at which substance is abused among adolescents has become a source of global concern. This increase in rate of substance abuse globally has brought problems such as increase in crimes, sexual violence, increase in cases of Hepatitis B and C virus, increase in HIV/AIDS diseases, malfunction of the veins and poor social structure (United Nations Office on Drugs and Crime –

UNODC, 2007). Substance abuse is a problem that has spread and increased rapidly in educational institutions especially among secondary school students (Amosun, Ige & Ajala, 2010).

World Health Organization (WHO, 2015) estimated that there are 2 billion-alcohol user, 1.3 billion smokers and 185 million illegal drug user worldwide. According to Substance Abuse and Mental Health Services Administration (SAMHSA, 2014), 78 per cent of the 2.4 billion people worldwide abusing substance are adolescents. Mortality statistics showed that illicit substances claim about 200,000 lives a year and about 500 million a year for tobacco (UNODC, 2012). In 2014, 9.8 million adolescents in the United State had a serious mental illness due to substance abuse, in that same year 22.5 million of American age 12-15 need treatment for illicit drugs use (SAMHSA, 2016).

In Nigeria adolescents are not exempted from the problem of substance abuse. Akannam (2008) noted that northern Nigeria has the highest rate of substance abuse in Nigeria, with 37.57 per cent of substance abuse victims from northwest Nigeria and 32 per cent from northeast Nigeria. It could be deduced that the above problem can lead to serious health issues among secondary school students; hence, prevention in this group is important to curtail the dangerous effects of substance abuse.

Substance is a chemical that could bring about a change in the body functioning. Balogun (2006) defined substance as a chemical that modifies perceptions, cognitive, mood, behaviour and general body function. Substance could thus be considered as chemical modifiers of the living tissues that could bring about physiological and behavioural changes (Nnachi, 2007). Substance could be legal or illegal drugs, prescription drugs and over-the-counter drugs, inhalants, solvents, tobacco, nicotine and alcohol that could be used to modify the functioning of the body system (Buddy, 2011).

Abuse is simply the improper usage or application of a thing for a wrong or bad purpose. According to Roubicek (2008), abuse is the improper usage or treatment of an entity, often to unfairly or improperly gain benefit. Abuse on the other hand is a multi-dimensional phenomenon that encompasses a broad range of behaviour, event, and circumstances, unlike random acts of violence or exploitation (Otieno & Ofulla, 2009). In this study, abuse is the excessive or improper usage of substance without medical justification.

Substances commonly abused by adolescents, youth and adults have been categorized by different authors. Kanechi (2012) categorized substances usually abused as alcohol, tobacco, drugs, cannabinoids, amphetamine, caffeine, hallucinogens, inhalant, opium, stimulants, phencyclidine, sedative, hypnotic and depressants. WHO (2002) categorized substances commonly abused as alcohol, nicotine, cannabinoid (marijuana or Indian hemp), stimulants, inhalants, drugs and hallucinogens.

Alcohol is the most widely abused psychoactive substance among

secondary school students. Alcohol is a natural product of the fermentation of sugar and water (Odilola, 2008). Fareo (2012) indicated that alcohol is made up of many chemicals, the alcohol that is found in drinks and medicines is known as 'ethyl alcohol' or 'ethanol, some example of alcohol are distilled spirits - vodka, rum and whiskey.

Cannabis can be dangerous to health. National Cannabis Prevention and Information Centre (NCPIC, 2016) asserted that cannabis is an illegal drug derived from the plant cannabis sativa, the main active ingredient in cannabis is called delta-9 tetrahydo-cannabinol, commonly known as THC, which is the part of the plant that makes the user 'high'. NCPIC further reported that cannabis is used in three main forms: marijuana, hashish and hash oil. Marijuana is made from dried flowers and leaves of the cannabis plant, it is the least potent of all the cannabis products and is usually smoked. Hashish is made from the resin (a secreted gum) of the cannabis plant. It is dried and pressed into small blocks and smoked. It can also be added to food. Hash oil is the most potent cannabis product, is a thick oil obtained from hashish. It is also smoked.

Inhalants are substances that are harmful to the body. National Inhalant Prevention Coalition (2006) asserted that inhalants are toxic substance that is poisonous or contains chemical vapors that can cut off the brain's supply of oxygen, producing psychoactive (mindaltering) effects. Mfrekenfon and Donbrapade (2014) identified some examples of inhalants as glues, gasoline, cleaning fluids, petroleum products like kerosene and butane.

Narcotic is another type of substance. Narcotics are substances from the opiate family and they have the capability of controlling pain and induce sleep (Fareo, 2012). Examples of nicotine according to NIDA (2007) are cigarettes, cigars, smokeless tobacco, snuff, spit tobacco, bidis and chew.

Determinant is something that influences the outcome of another thing. According to Cornog, Vranken and West (2008) determinant is an element that identifies or determines the nature of something that fixes or conditions an outcome. Lopes, Brunno, Giovana and Sandra (2013) defined determinant as a factor that establishes the nature of an entity or event. In this study, determinants refer to factors that decide the outcomes of an event. It has been established that no single determinant is responsible for abuse of substances among adolescents. However, WHO (2004) categorized the factors determining substance abuse as environmental risks factors, individual risk factors, parental income, and family structure including genetics which can contribute to substance abuse and addiction.

However, the trend of substances abuse is higher in some geographical or cultural area than other places. NIDA (2012) noted the prevalence of use of marijuana, LSD or heroin among African Americans. In Nigeria, it is observed that tobacco has a higher prevalence in northern part than in the southern part, while alcohol is more abused in the south than in the northern

part (Raji, Abubakar, Oche, & Kaoje, 2013). Igwe et al. (2009) found out that alcohol is the most commonly abused substance in Enugu state. This study seeks to find out substances that are commonly abused in Shongom LGA.Substance abuseis associated with devastating effects and consequences.

Substance abuse affects the decision making process of students, their creative thinking and the development of necessary life and social skills. Some adverse consequences of substance abuse include insomnia, prolonged loss of appetite, increased body temperature, greater risk of hepatitis and HIV/AIDS infection, death, various forms of cancers, ulcers and brain damage (Perkinson, 2002).

Socio-demographic determinants are important variables that comprise both social and demographic characteristics of the subject which may affect health outcomes. Gage (2007) state that socio-demographic determinants are those factors related to age, sex, marital status, economics status, religion, level of education, parity, socio-cultural belief and geographical location that can influence the outcome of other variables in a study. Socio-demographic determinants in this study refer to factors or characteristics such as family status, parental income, age and gender, which influence substance abuse among secondary school students in Shongom LGA, Gombe State. The present study is concerned with socio-demographic determinants of family status, parental income, age and gender.

Many adolescents indulge in substance abuse as a means of escapism. Some adolescents are lured into substance abuse due to the diverse and complex family status where they exist. Corsetti (2002) averred that adolescents living in two biological parent households would be less likely to participate in substance abuse than adolescents living in one-parent or stepparent households because there is more supervision and monitoring as well as a better likelihood of closer bonds between the child and parent in two parent families. WHO (2004) submitted that conflict within the household can amplify stress and cause some to seek an escape through these substances. In addition, the strength of relationships within the family, structure of authority and overall happiness can affect the development and acceleration of substance abuse. Apart from family status, parental income is also a social factor considered to be associated with substance abuse.

Secondary school students are also called the in- school adolescents. Midrange (2006) opined that student is a learner who enrolled in an educational institution. In this study, a secondary school student refers to a male or female individual within the age of 12-19 years who is currently undergoing secondary education at any approved or registered secondary school in Shongom LGA, Gombe State.

The study was carried out in Shongom LGA, Gombe State. It is a rural area that the inhabitants are predominantly farmers, civil servant, traders and politicians who have little or no time to guide or monitor their children in term of involvement in substance

abuse, some parents go to the farm while other are more concern about their political ambition leaving their children roaming about in the street. There is a popular market called lagal situated in Shongom community, where secondary school students do hawk and engage in bus conducting. Hawking activities often make them preys to substance abuse because they mingle with all sort of people in the market. Due to the bizarre situation, Nigerian Drug Law Enforcement Agency (NDLEA 2015) Gombe State chapter reported to have arrested about 3,261 students for substance abuse between 2011- 2014. However, various theories have been propounded to explain adoption of certain behaviours and how these behaviours can be changed when deemed inimical to human health.

The study was to find out the socio-demographic determinants of substance abuse as well as determine the preventive measures against substance abuse among secondary school students in Shongom LGA, Gombe State. Specifically, the study sought to answer to three questions as follows:

1. What are the commonly abused substances by secondary school students in Shongom LGA, Gombe State?
2. What is the proportion of secondary school students who abuse substance in Shongom LGA, Gombe State.
3. What is the relationship between family status and substance abuse among secondary school students in Shongom LGA, Gombe State?

Two null hypotheses will be postulated and tested at .05 level of significance.

1. There is no significant relationship between family status and substance abuse among secondary school students in Shongom LGA, Gombe State.

Methods

The study adopted correlational research design. According to Nworgu (2015) correlational research design is used when the objective of the study is to establish the relationship or association between two variables. The population for the study consisted of 2,618 secondary school students in all the seven public secondary schools in Shomgom LGA. This is comprised of 1421 male students and 1197 female students (Ministry of Education, Gombe State, 2021) and 10 experts. The sample size for this study was 347 respondents and 10 experts.

Taro Yamane formula for computing sample size was used to determine the sample size for the population at 95% confidence level. Stratified proportionate sampling technique was used in this study to determine a proportionate representation of male and female from each school. Taro Yamane formula was used to determine the sample size for each of the strata. The instruments were Socio-demographic Determinants of Substance Abuse questionnaire (SDSAQ). The (SDSAQ) was adapted from the Youth Risk Behaviour Survey questionnaire – YRSBQ-2021. YRBSQ-2021 consist of 34 items with dichotomous and polychotomous response options such as "Yes" "No" 0–5 or more time/days/hours/sticks/glasses and Never, Rarely, Sometimes, Most times, Always. The instruments was subjected to

face validity by three experts, three in Department of Human Kinetics and Health Education, the experts' corrections, input and suggestion were used to produce the final instrument that was used for the study. The reliability was ascertain using split half methods. Twenty 20 copies of questionnaire were administered to students of Government Secondary School, Lakanji, Kaltungo LGA of Gombe State which is not within the study area. Cronbach Alpha was used to ascertain the reliability of the instrument result of the reliability index at .79, therefore the instrument was adjudged reliable and suitable for this study.

Data Collection instrument tagged SDSAQ was administered to the respondents within the period of ten days by the researcher with the help of research assistants who are teachers in the schools. The researcher and the teachers ensure that there was no exchange of ideas during the process of completing the questionnaire. The completed copies of the questionnaire were collected on the spot to ensure high return rate, and the returned rate of 97 per cent was obtained. Data was analyzed using the Statistical Package for Social Sciences version 22. The analysis was carried out based on the research question. Research question 1 and 2 was analyzed using frequencies and percentages while research question 3 analyzed using the Pearson product moment correlation co-efficient. Also the null hypotheses formulated for the study was tested at 0.05 level of significance using linear regression analysis.

Results

Table 1

Substance Commonly Abused by Secondary School Students (n= 347) .

S/n	Item	Frequency (f)	Per cent (%)
1	Alcohol	335	23.3
2	Tobacco	261	18.1
3	Cannabinoid	347	24.1
4	Inhalant	212	14.7
5	Drugs	285	19.8
	Total	1440	100

Table 1 shows that the substances commonly abused by secondary school students in Shongom LGA, Gombe State was cannobinoid (24.1%) alcohol (23.3%), drugs (19.8%), tobacco (18.1%) and inhalant (14.7%).

Table 2
Proportion of Secondary School Students Who Abuse Substances (alcohol, tobacco and drugs) (n = 347)

S/n	Items statement	0-2 times f(%)	3-9 times f(%)	10-29 times f(%)	30 times f(%)
	Alcohol				
1	In the past 30 days, how many times did you have at least one drink of alcohol?	230(66.3)	60(17.3)	26(7.5)	31(8.9)
2	In your life, how many times have you had at least a drink of alcohol?	214(61.6)	50(14.4)	57(16.4)	26(7.5)
3	In the past 30 days, how many times did you have 5 or more drinks of alcohol?	252(72.6)	57(16.4)	9(2.6)	29(8.4)
	Average	232(66.8)	56(16)	31(8.8)	29(8.2)
	Tobacco				
4	In the past 30 days, how many times did you smoke cigarette?	281(81)	22(6.4)	21(6.1)	23(6.6)
5	In the past 30 days, how many times did you smoke cigarette in the school compound?	288(86)	30(8.6)	18(5.2)	11(3.2)
6	In the past 30 days how many times did you use/chew tobacco, snuff – dip?	307(88.5)	14(4.1)	15(4.3)	11(3.2)
	Average	292(85.2)	22(6.4)	18(5.2)	15(4.3)
	Drugs				
7	In the past 30 days, how many times have you taken prescription drugs without a doctor's prescriptions?	245(70.6)	48(13.8)	18(5.2)	36(10.4)
8	In your life, how many times have you sniffed glue, inhaled any paints - sprays to get high?	289(83.3)	33(9.5)	11(3.2)	14(4.0)
9	In your life, how many times have you taken pills - shots without doctor's prescription?	213(61.4)	77(22.2)	16(4.6)	38(11.0)
10	In your life, how many times have you used any form of cocaine?	321(92.5)	13(3.8)	6(1.7)	7(2.0)
11	In your life, how many times have you used a needle to inject any illegal drugs?	310(89.4)	14(4.1)	3(.9)	20(5.8)
	Average	276(79.4)	37(10.7)	11(3.1)	23(6.6)

Data in table 2 shows the proportion of secondary schools students who abused substance (Alcohol, tobacco and drugs). From the table, 66.8 per cent of the students abused alcohol 0-2 times, 16 per cent abused alcohol 3 to 9 times, 2.6 per cent abused alcohol 10 to 29 times and 8.4 per cent abused alcohol 30 times. The table also showed that 85.2 per cent of students abused tobacco 0-2 times, 6.4 per cent abused tobacco 3 to 9 times, 5.2 per cent abused tobacco 10 to 29 times and 4.3 per cent abused tobacco 30 times. In addition 79.4 per cent of students abused prescription drugs 0-2 times, 10.7 per cent abuse prescription drugs 3 to 9 times, 3.1 per cent abused prescription drugs 10 to 29 times and 6.6 per cent abused prescription drugs 30 times.

Table 3

Relationship Between Family Status and Substance Abuse Among Secondary School Students (n = 347)

S/N	Items Statement	correlation value (r)	Decision
	Alcohol		
1	In the past 30 days, on how many times did you have at least one drink of alcohol?	0.227	LR
2	Age when you had your first drink of alcohol?	0.130	VLR
3	In your life, how many times have you had at least a drink of alcohol?	0.143	VLR
4	In the past 30 days, on how many times did you have 5 or more drinks of alcohol?	0.210	LR
5	In the past 30 days, what is the largest number of alcohol drink you had in a row within a couple of hours?	0.249	LR
	Cluster value Tobacco	0.1918	VLR
6	In the past 30 days, how many times you smoke cigarette?	0.262	LR
7	Age when you smoked a whole cigarette for the first time?	0.284	LR
8	In the past 30 days, how many cigarette did you smoke per day?	0.280	LR
9	In the past 30 days, how many days did you smoke cigarette o school compound?	0.282	LR
10	In the past 30 days, how many days did you use chewing tobacco, snuff or dip?	0.206	LR
	Cluster value Drugs	0.2628	LR
11	in the past 30 days, how many times have you taken prescription drugs without a doctor's prescription?	0.182	V LR
12	In your life, how many times have you sniffed glue, inhaled any paints or sprays to get high?	0.216	LR

13	In your life, how many times have you taken pills or shots without doctor's prescription?	0.079	VLR
14	In your life, how many times have you used any form of cocaine?	0.225	LR
15	In your life, how many times have you used a needle to inject any illegal drugs?	0.218	LR
		0.184	VLR LR
	Cluster value Overall value	0.213	

Key: .01- .19 = very low relationship (VLR); .20- .39 low relationship (LR); .40- .69 moderate relationships (MR); .70- 89 = high relationship (HR), .90- 99 = very high relationship, 1.00 = (VHR) perfect relationship (PR).

Table 3 shows the correlation values and the corresponding P values of family status and substance abuse as follows. Alcohol (r = 0.1918; P = 0.007) indicating very low relationship, drugs (r = 0.184; P = 0.062) indicating very low relationship, tobacco (r = 0.2628; P = 0.000) indicating low relationship. The table further shows overall correlation value (r = 0.213; P = 0.036) which indicate low relationship between family status and substance abuse.

Table 4

Regression Analysis Testing the Null Hypothesis of no Significant Relationship between family status and substance abuse (n = 347)

Model	R	R^2	Adj.R^2	S.E	df	m/s	F-cal	Beta (B)	t-cal	Sig
1	0.344	0.118	0.078	0.093	15	2.043	2.949	1.485	15.961	0.000

Table 4 reveals that R^2 is equal to 0.118. This implies that family status can be used to explain the variation in substance abuse by 11.8 per cent. The table further shows that F-cal is 2.949 with p–value = 0.000 which is less than 0.05 level of significance, implying that the model is adequate and that family status predicts substance abuse. The null hypothesis is rejected. Hence, there is a significant relationship between family status and substance abuse.

Discussions

The finding in table 1 indicated that the commonly abuse substance by secondary school students are cannobinoid and alcohol. This result was expected and therefore not surprising because cannobinoid and alcohol are available and not difficult for students to obtain. The present finding is in agreement with the findings of Nalah and Audu (2014) who reported that alcohol and Marijuana were the top two on the list of substance abused by students. The findings of this study contradicts that of

Oshodi, Aina and Onajole (2010)who found out that the commonest substances abuse by students were caffeine (kolanut and coffee), mild analgesics (paracetamol and aspirin) and anti-malarials, most especially chloroquine.The reason for the disagreement may be as a result of the area of study. These ssubstance can cause negative effects in the body of the abuser, also resulting to violence, poor performance in school, aggressiveness, anti-social behaviour in the society.

The finding in table 2 indicated that the proportion of secondary school students who abuse substance in Shongom LGA, Gombe State shows that (17%) abused alcohol, (9.5%) abused tobacco and (9.7%) abused prescription drugs. This result was expected and therefore not surprising because students are involve in the act of substance abuse. The findings contradicts to that of Kabiru (2014) who found out that students never exhibit substance use. The author report shows that the non prevalence of substance use behaviours could be attributed to the teaching of health topics in schools that discourage substance use among students, also the culture and religion in the study area frown at and discourage substance use. It is therefore important for teaching of health topics about dangers and effect of substance abuse for students in Shongom LGA, Gombe State.

The finding in table 3 revealed that the relationship between family status and substance abuse was low. This finding was not surprising but expected because from early childhood to the ongoing development into adulthood, adolescent relationships with family have some of the greatest influence on the development of addictions or not, and living within the family group helps adolescents to learn ways of behaving either moral or immoral since family is the unit to which every member of the society and social system is given identification. This finding agrees with that of Corsetti (2002) who found that family status had low relationship with substance abuse.

Conclusion and Recommendations

The commonly abused substances by secondary school students in Shongom LGA Gombe State were cannabinoid and alcohol. The proportion of secondary school students who abused substances in Shongom LGA, Gombe State shows that 17% abused alcohol, 9.5% abused tobacco and 9.7% abused prescription drugs. The relationship between family status and substance abuse among secondary school students was low in Shongom LGA, Gombe State. Also family status predict substance abuse among secondary school students in Shongom LGA, Gombe State.

Based on the findings and conclusions of this study, the following recommendations are made that teachers in high schools and colleges, parents, mass-media and other concerned people should teach students about the health and social problems associated with substance abuse. Parents should sincerely re-orient their children on the dangers of drugs on their health and others since charity begin at home and ministry of health and ministry of education and other

health parastatal should do more in educational campaigns on the negative consequences of substance abuse.

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