

Factors Influencing the Prevalence of Substance Abuse Among Undergraduate Students in Nigeria Universities

Dr. Iguodala-Cole, Hope¹, Ishaya Daniel L. (Ph.D)², Anto Jacob B.³,
Obiabunmuo, Adaobi N.²

1. (ATAC) Abuja Graduate School
2. Department of Sociology, Faculty of Social Sciences, Nasarawa State University, Keffi.
3. Department of Sociology, Nigerian Army University, Bui

ABSTRACT

This study examines the reasons behind the continued rise in substance abuse among students in Nigerian Universities, with focus on Nasarawa State University, Keffi and Kaduna State University, Kaduna. University students seems more susceptible to substance use amongst different youth groups in Nigeria because most of them live outside the watch of their parents or guardians. Hence, the motivation for an empirical study on the prevalence of substance abuse amongst students. The study adds to the existing empirical literature on factors influencing the prevalence of substance abuse among students. The specific objectives are to: ascertain if the class status of students influence their involvement in substance abuse, establish the relationship between age and substance abuse amongst others. Personally administered questionnaires were used to collect the primary data for the study. A total of 390 questionnaires, at 5% level of error. Findings revealed that age can influence substance abuse as data indicates a significant influence of substance abuse amongst the youthful age. The differential association theory was adopted to help us understand if the problem of substance abuse is a learned issue in the social environ. It was concluded that, the quest for substance abuse is embedded in the social learning process. Amongst the recommendation was that there is a need for government to intensify its campaigns on the dangers that comes with substance abuse in our tertiary institutions.

KEY WORDS:

Prevalence, Substance Abuse, undergraduate students and peer pressure.

Introduction

The upsurge of substance abuse amongst students in Nigerian Universities is posing a potent threat to the issues of national development. The level of social ills within and outside the University environment posit a serious challenge to the Nigerian academic system. This social ills have resulted in the destruction of lives, properties and the disruption of academic calendar. This has also added to the already bad national security issues which has become a great concern that needs urgent solution even as more students are becoming more susceptible to substance abuse. Substance abuse is a social ill that is of public health importance and a crucial determinant of a healthy nation. In the same vein, Onoja in his research in 2010, estimated that the average annual retail cost of psychotropic substances in

Nigeria is more than USD \$15,000, while alcoholic beverages, aside from spirit, generate more than USD \$30,000 from sales to a consumer population of about 30 to 35 million people. Furthermore, this assertion does not showcase Nigeria as a healthy nation. This study examines the reasons for the continued rise in substance abuse among students in Nigerian Universities, with focus on Nasarawa State University, Keffi and Kaduna State University, Kaduna.

Over time, abuse of substance has been recognized as a major source of socio-economic and political problems in several countries across the globe. The range of activities involved in illicit substance includes the cultivation of the raw materials (for example, Opium poppy, coca shrub, cannabis sativa or Indian hemp), processing of materials; production of synthetic psychotropic substances, trading (trafficking, whole sales and retail sales) and the use and abuse of substance, (Alemika, 2008). Over the last two decades now, from the early 1980s, Nigeria has been identified as a transit nation for heroin and cocaine. This means that dealers in these substances use Nigeria airports, seaports and porous borders for the international distribution of these prohibited substances. Additionally, some unpatriotic Nigerians cultivate Indian hemp which they sell to local and foreign consumers. Unlike the raw material from which cocaine and heroin are extracted which are not cultivated in the country, cannabis sativa (Indian hemp) is cultivated in many states of the country (Dagaci, 2011). The participation of people of African descent in large-scale international substance smuggling is acknowledged however, there is also the case that people of African descent normally transport substances into Western countries as substance mules (Lyman, 2014).

Globally, substance use has become a major public health issue (Owoaje & Bellow, 2010). The United Nations Office for Drug Control and prevention estimated that between 155 and 250 million people or 3.5% to 5.7% of the world population age 15 to 64 have used substance at least once in the last twelve months from January to December 2010, (UNODC, 2010) for most of European and Asian Countries Opiates continue to be the main substance of abuse and accounts for 62% of all treatment demands. In South America, substance abuse related treatment continues to be mainly linked to the use of cocaine (59% of all treatment demand). However, in Africa, the bulk of all treatment demand is linked to cannabis sativa (64%), (WHO, 2004).

There is an increasing trend in psychoactive substance use and abuse in many African countries (Adelakan et al, 2000, Reddy, Resnicow, Omardien, & Kamarau, 2007). In Nigeria for example, where substance abuse was uncommon many decades ago, there are today ample visual evidence of substance use by the roadsides and motor parks of most urban centers where young adults could be seen using marijuana (Rasheed & Ismaila, 2010). Industrialization, urbanization and increased exposure to western lifestyle have been noted to contribute to the increasing trend of substance use in Nigeria, with alcohol and cigarette acting as gateway substances like cocaine, heroin, amphetamine, inhalant and hallucinogens

(Abiodun, Adelekan, Ogunremi, Oni & Obayan, 1994). Youths have been identified as a high risk group for the use of psychoactive substances. The use of these substances is not only a threat to their health but also to the health and social wellbeing of their families and societies, (UNODC, 2001 cited by Owoaje & Bellow, 2010). Substance experimentation is common in adolescents and substantially elevates the risk for persistent substance use, disorders and other comorbid disorders in later life stages. Despite the effort of many concerned bodies to curb this menace, many organizations and individuals still present these substance as though they are harmless which often lure irrational youths into drugs and alcoholism. Substance use amongst young people should be a matter of concern to all Nigerians especially the government, school heads, the leaders of various religious groups and other NGOs. This study therefore aimed at establishing the reason behind the continued rise in substance abuse among students in Nigerian Universities, with focus on Nasarawa State University, Keffi (NSUK) and Kaduna State University, Kaduna (KASU).

Conceptualization of Substance Abuse

Modern study of sociology focuses on application of traditional sociological concepts in analyzing dynamics in contemporary human society. This marks a departure from the traditional approach of centering on social relation concepts, themes and issues, (Schein, 1990). It is on this premise that this paper is designed to examine the varied views, models and concept of substance abuse.

Substance abuse, also known as drug abuse, is a patterned use of a drug in which the user consumes the substance in amounts or with methods which are harmful to themselves or others, and is a form of substance-related disorder. Widely differing definitions of substance abuse are used in public health, medical and criminal justice contexts. In some cases, criminal or anti-social behaviour occurs when the person is under the influence of a drug, and long term personality changes in individuals may occur as well. In addition to possible physical, social, and psychological harm, use of some substance may also lead to criminal penalties, although these vary widely depending on the local jurisdiction. Substance most often associated with this term include: alcohol, cannabis, barbiturates, benzodiazepines, cocaine, methaqualone, opioids and some substituted amphetamines like methamphetamine and MDMA. The exact cause of substance abuse is not clear, with the two predominant theories being: either a genetic disposition which is learned from others, or a habit which if addiction develops, manifests itself as a chronic debilitating disease.

Public health definitions

Public health practitioners have attempted to look at substance use from a broader perspective than the individual, emphasizing the role of society, culture, and availability. Some health professionals choose to avoid the terms alcohol or drug "abuse" in favor of language they consider more objective, such as "substance and

alcohol type problems" or "harmful/problematic use" of drugs. The Health Officers Council of British Columbia — in their 2005 policy discussion paper, *A Public Health Approach to Drug Control in Canada* — has adopted a public health model of psychoactive substance use that challenges the simplistic black-and-white construction of the binary (or complementary) antonyms "use" vs. "abuse". This model explicitly recognizes a spectrum of use, ranging from beneficial use to chronic dependence.

Medical definitions

A 2010 study ranking various illegal and legal drugs based on statements by drug-harm experts. Alcohol was found to be the overall most dangerous drug. 'Drug abuse' is no longer a current medical diagnosis in either of the most used diagnostic tools in the world, the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders (DSM)*, and the World Health Organization's *International Statistical Classification of Diseases (ICD)*.

Value judgment

Philip Jenkins suggests that there are two issues with the term "drug abuse". First, what constitutes a "drug" is debatable. For instance, GHB, a naturally occurring substance in the central nervous system is considered a drug, and is illegal in many countries, while nicotine is not officially considered a drug in most countries. Second, the word "abuse" implies a recognized standard of use for any substance. Drinking an occasional glass of wine is considered acceptable in most Western countries, while drinking several bottles is seen as an abuse. Strict temperance advocates, who may or may not be religiously motivated, would see drinking even one glass as an abuse. Some groups even condemn caffeine use in any quantity. Similarly, adopting the view that any (recreational) use of cannabis or substituted amphetamines constitutes drug abuse implies a decision made that the substance is harmful, even in minute quantities. In the U.S., drugs have been legally classified into five categories, schedule I, II, III, IV, or V in the *Controlled Substances Act*. The drugs are classified on their deemed potential for abuse. Usage of some drugs is strongly correlated. For example, the consumption of seven illicit drugs (amphetamines, cannabis, cocaine, ecstasy, legal highs, LSD, and magic mushrooms) is correlated and the Pearson correlation coefficient $r > 0.4$ in every pair of them; consumption of cannabis is strongly correlated ($r > 0.5$) with usage of nicotine (tobacco), heroin is correlated with cocaine ($r > 0.4$) and methadone ($r > 0.45$), and is strongly correlated with crack ($r > 0.5$)

Substance misuse

Substance misuse is a term used commonly when prescription medication with sedative, anxiolytic, analgesic, or stimulant properties are used for mood alteration or intoxication ignoring the fact that overdose of such medicines can sometimes have serious adverse effects. It sometimes involves drug diversion from the individual for whom it was prescribed. Prescription misuse has been defined differently and rather inconsistently based on status of drug prescription, the uses

without a prescription, intentional use to achieve intoxicating effects, route of administration, co-ingestion with alcohol, and the presence or absence of dependence symptoms. Chronic use of certain substances leads to a change in the central nervous system known as a 'tolerance' to the medicine such that more of the substance is needed in order to produce desired effects. With some substances, stopping or reducing use can cause withdrawal symptoms to occur, but this is highly dependent on the specific substance in question.

Depending on the actual compound, drug abuse including alcohol may lead to health problems, social problems, morbidity, injuries, unprotected sex, violence, deaths, motor vehicle accidents, homicides, suicides, physical dependence or psychological addiction. There is a high rate of suicide in alcoholics and other drug abusers. The reasons believed to cause the increased risk of suicide include the long-term abuse of alcohol and other drugs causing physiological distortion of brain chemistry as well as the social isolation. Another factor is the acute intoxicating effects of the drugs may make suicide more likely to occur. Suicide is also very common in adolescent alcohol abusers, with 1 in 4 suicides in adolescents being related to alcohol abuse. In the US, approximately 30% of suicides are related to alcohol abuse. Alcohol abuse is also associated with increased risks of committing criminal offences including child abuse, domestic violence, rapes, burglaries and assaults.

Substance abuse problem in Nigeria began to assume very worrisome dimensions at the end of the Second World War following the return of some Nigerian soldiers from mainly, Burma, India, where they had fought war. One of the negative consequences of the war was the return of the soldiers with some seeds of *cannabis sativa*, also known as Indian hemp, which they in turn experimented and discovered that the illicit plant could do well in some parts of the country, with time, the cultivation of *cannabis sativa* began to grow and so the abuse of the cannabis plants. (Suleiman, 2011).

Substance Commonly Abuse

There are many types of substance and attempts will be made to list all the kinds of substances available. These substances will be categorized into the socially acceptable and the illegal substances.

Socially Acceptable

- a. **Alcohol:** Although there is high consumption of alcohol all over the world, the circumstances under which they are used vary considerably. Alcohol in Nigeria takes different forms ranging from the locally produced ones like 'Burukutu' and the western types such as beer, wine. Alcohol, beer, wine, spirits and brandy are in substance category mainly because of their chemical contents and potentials for addiction. Weil (1973), Caffeine is found in products like coffee, cocoa and kola-nut. It is a stimulant that affects the cerebral, cardiac as vasomotor and respiratory system. Weil

(1973); says caffeine increases one's heart rate and causes nervous irritability and muscular tremor.

- b. **Nicotine (Tobacco):** The use of nicotine found in tobacco is as old as history of mankind. It is consumed in products like cigarette as well as snuff. Nicotine also contains kola-nut. Weil (1973), acknowledge that despite health consequences, declining social acceptability, nicotine consumption is still on the increase.

The illegal substance includes;

- a. **Marijuana (Indian hemp):** Dambazau (2012) points out that marijuana also known as cannabis sativa, dagga, or ganja, is a tobacco-like substance derived from the hemp plant. It is grown and produced throughout the world, and can be ingested by smoking, chewing or eating. It is cheap and classified as soft substance, but abuse of the product can lead to disorientation, paranoia, and psychosis. It is cultivated in large quantities in Nigeria.
- b. **Cocaine:** It is extracted from the coca plant of the Andean countries of Latin America. It is the most potent stimulant of natural origin with powerful psychotropic properties. It can be administered by smoking, sniffing, or intravenous injection. It creates extraordinary dependency with very serious physiological and psychic consequences. Crack, a mixture of cocaine, sodium bicarbonate and water, delivers many times the impact of powdered cocaine.
- c. **Heroin:** This a semi-synthetic narcotic derived from the opium poppy, can be taken by smoking, sniffing or through injection. The principal areas of production are the Golden Triangle (the highlands and Thailand) and South-West Asia's Golden Crescent (Southern Afghanistan, Northern Pakistan, and parts of Iran). This substance has a high physical and psychological dependency factor. Heroin overdose can be fatal.
- d. **Synthetic Substance, such as amphetamines and the hallucinogens LSD:** They are mainly produced and consumed in Europe and North America. However, considerable quantities of the depressant methaqualine (Mandrax) are produced and exported from India.

Statement of the Problem

The health of young people is a key factor in the promotion and preservation of the health of the population as a whole because it determines the overall level of population health in the short term (Tsvetkova & Antonova, 2013). There appears to be an increasing prevalence of drug abuse amongst university students despite the efforts of concerned bodies to curb this menace. University students are the most susceptible to drug use amongst different youth groups in Nigeria because most of them live outside the watch of their parents or guardian. Hence, a comprehensive empirical study on the prevalence of drug abuse amongst university

students.

It is logical to think that if this problem of substance abuse persists among undergraduate, it may be difficult for such students to obtain good academic qualifications and there is also the tendency for increase in anti-social behaviour and behavioural problems among students in and outside the university. This unfortunate, anti-social behaviour therefore, calls for some intellectual efforts to empirically elucidate factors influencing the prevalence of substance abuse among undergraduate students.

Objectives of the Study

The main objective of this study is to investigate the factors responsible for the prevalence of substance abuse among undergraduate students of Nasarawa State University, Keffi and Kaduna State University Kaduna and the specific objectives are to:

1. Examine the factors responsible for the prevalence of substance abuse among undergraduate.
2. Assess whether substance abuse can result to crime within the campuses of Nasarawa State University, Keffi and Kaduna State University, Kaduna.
3. Ascertain whether the social class/status of students' influence their involvement in substance abuse.
4. Establish the relationship between age and substance abuse

Review of Literature

The prevalence of health-risky behaviours associated with adolescent illicit drug use has attracted growing international recognition. Especially in southern Africa, unsafe sexual behaviors may have significantly untoward consequences, considering the high HIV prevalence estimates from the region (Garvin et al., 2006). Unfortunately, adolescents and youth may underrate the harmful effects of unhealthy lifestyles (McMaster and Keshav, 1994). These unpleasant youthful activities are widespread in Nigeria and all over Africa, thus giving a lot of concern to the government and the general public (Greene, 1980). Substance abuse remains a major health challenge all over the world (UNODC, 2005). Haladu (2003) describes drug abuse as excessive and persistent self-administration of a drug without regard to medically or culturally acceptable patterns. Odejide (2000) posited that a drug is said to be abused when its use is not pharmacologically necessary especially when it's used in the face of legal prohibition or when socially acceptable beverage is used excessively. Drug abuse may lead to organized crimes and disruption of normal academic programmes. It has led to increased secret cult activities in secondary schools and most Nigerian universities, which has been a source of threat to lives and properties (Aluede, 2000).

The impact of drug abuse among Nigerian youths has also been associated with the

loss of our societal values and ideals (Aluede, 2000). Drugs alter the normal biological and psychological functioning of the body, especially the central nervous system (Melis et al., 2005). Majority of the Nigerian youths ignorantly depend on one form of drug or the other (such as Tobacco, Indian hemp, cocaine, morphine, Heroine, Alcohol, ephedrine, Madras, Caffeine, Glue, Barbiturates and Amphetamines) for their various daily activities (Oshikoya and Alli, 2006). Oshikoya and Alli (2006) in their studies on perception of drug abuse amongst Nigerian undergraduates also identified dependence and addiction as one of the major consequences of drug abuse, characterized by compulsive drug craving seeking behaviours even in the face of negative consequences. Maithya (2009) revealed that the common reasons for drug abuse amongst secondary school students in Kenya are mostly out of curiosity and acceptance by friends (peer pressure). A study by Kiiru (2004) showed that peer pressure was responsible for youths' consumption of drugs for the purpose of stimulating appetite for food.

Also Ndom and Adalakun (1996) argued that male children from an unstable family were associated with high risk of substance abuse, this argument is supported with clinical findings by Nyki (2015) indicates that cannabis abusers are mostly young Nigerian men, including students, who have been deprived of parental supervision and warmth from infancy. Awoyinka (2012) argued that the very high rate of alcohol use and abuse among students in secondary and tertiary institutions in Nigeria began from their childhood or early adolescence. At times youth, including students, who hawk for their parents, are themselves exposed to substance abuse. Some youths will experiment and stop, or continue to use occasionally without significant problems. Others will develop addiction, moving on to more dangerous drugs and causing significant harm to themselves and the society at large (Pela, 1989).

Contrary to misguided information by those who indulge in substance abuse, it has various effect on academic performance. Those who abuse substance according to Tamen (2008) suffer the following consequences; distinct down-ward performance in school and prone to exams malpractice, rustication and expulsion, increased absenteeism in lecture or tiredness. Chronic dishonesty, lying, cheating, waywardness, insensitivity, eractism and scandalism. Change of friends, evasiveness, talking about the new ones, poor concentration and psycho-social manifestations. Increasing and inappropriate anger, very hostile, secretiveness, sleeplessness, anxiety, crafty and unresult-oriented. Loss of sense of responsibility (not appoint-able) or elected into reasonable positions in school. Prone to criminal behavior e.g., stealing, armed robbery, murder, thuggery and rape. Delinquent acts e.g. hooliganism, arrogance, brashness, voodooism. Lack of achievement of life purpose and fulfillments. Vulnerability to diseases e.g. AIDS. Damage to body organs e.g. kidney damage, liver damage which absolutely truncates the substance user's academic performance, career, couple with premature death, (Dagaci, 2011). Social degradations e.g. arrest, stigmatization, isolation, aggression and hostility,

loss of motivation and riotous lifestyle, (Alemika, 2008).

Furthermore, this study makes significant contribution to empirical knowledge and most of the generalizations that emerged from this study were suggestive and conclusive of humane social adaptive response of a people in a reforming and developing nation like Nigeria.

Theoretical Explanation

Differential Association Theory of Crime

Edwin Sutherland's (1947) Differential Association theory was instrumental in bringing the sociological perspective of crime to the forefront. The Differential Association theory asserts that delinquent behaviours are learned in an environment where interactions exist.

Differential Association: Differential association refers to direct association and interaction with others who engage in certain kinds of behaviour or express norms, values, and attitudes towards such behaviour, (Akers, 2006). The process of differential association explains how normative conflict produces individual acts of crime. According to Sutherland (1947) criminal behaviour is learned in communication with other persons, particularly intimate ones. It is in these groups that all the mechanisms of social learning operate, (Akers, 2006).

Propositions of the Theory:

1. Criminal behaviour is learned
2. Criminal behaviour is learned through interactions with other persons in a process of communication. Evil communication corrupts good manners.
3. The principal part of the learning of criminal behaviour occurs within intimate personal groups.
4. When criminal behavior is learned, the learning includes (a) techniques of committing the crime, which sometimes are very complicated, sometimes are very simple; and (b) the specific direction of motives, drives, rationalizations and attitudes.
5. The specific direction of motives and drives is learned from definitions of legal codes as favourable and unfavourable.
6. A person becomes delinquent because of an excess of definitions favourable to violation of law over definitions unfavourable to violation of law. This is the principle of differential association.
7. Differential association may vary in frequency, duration, priority, and intensity.
8. The process of learning criminal behaviour by association with criminal and anti-criminal patterns involves all the same mechanisms that are involved in any other learning.
9. While criminal behaviour is an expression of general needs and values, it is not explained by those general needs and values since non-criminal behaviour is an expression of the same needs and values, (Sutherland

& Cressey, 2003).

Methodology

The pattern and nature of this study demands that emphasis be placed on survey research. Thus, the design adopted for this study is survey design. Here the design focused on exploratory cross sectional study of the population, what this means is that a fraction of the population will be selected for study, the data will only be extracted once. The target population for the study were undergraduate students in Nasarawa State and Kaduna State Universities. The population of both institutions as at 2015, which was the period at which the data was collected is put as follows: Nasarawa State University, has 16,598, while Kaduna State University has 7,023, the total population is 23,561. The sample size for this study was arrived at using (Israel, 1992) sampling determined table, which put the sample size for this study at 390, at 5% level of error, this samples were already put forth by Israel in his list of tables. The study captured Nasarawa State University and Kaduna State University, the study adopted the multi-stage sampling technique to draw sample for this study, first of all the study divided the university into clustered area and these clusters consist of the various faculties, in the same vein stratified sampling was use to stratified the faculties into departments and level of study i.e 100 to 500 level. Same procedure of stratified sampling was applied to each stratum in the selection of sample elements. Data were collected through the use of questionnaire. The questionnaire consists of close ended and open ended questions which were administered to the respondents during lecture hours and were retrieved back after 24 hours of administration this was so because it is the only avenue to which one can meet the students in one point and according to their academic level and departments. The data for this study is quantitative in nature. Percentage and frequency distribution as well as Multivariate analysis (Anova) were used to analyze the allowance level of students per month and kind of substance abused by students and how often the students abuse substances.

Presentation and Interpretation of Data

Table 1. Age distribution as regards to Substance Abuse

Nasarawa State University, Keffi (NSUK)			Kaduna State University, Kaduna (KASU)		Grand Total	
Age	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
16-20 years	43	23.5%	53	31.2%	96	27.2%
21-25 years	97	53%	51	30%	148	41.9%
26-30 years	31	16.9%	35	20.6%	66	18.7%
31-35 years	9	4.9%	15	8.8%	24	6.8%
35 years and above	3	1.7%	16	9.4%	19	5.4%
Total	183	100%	170	100%	353	100%

Source: Field Survey, 2015

Table one (1) shows the perception of the respondents as regards to the age bracket that are likely to abuse substances more, the data from Nasarawa State University, Keffi shows that substance abuse is likely to occur between persons within ages 21-25 years, and in Kaduna State University, Kaduna shows that substance abuse is likely to occur between the ages of 16-20 years of age, this invariably means that substance abuse is likely to occur between the ages of 16-25 years among students of these universities. Therefore, age is a major social demographic factor that can influence or deter substance abuse as the age bracket revealed in the analysis above indicates significant influence of substance abuse amongst the youthful age with high level of peer pressure, social status and exuberances.

Table 2. Opinion on whether social class/status influence students' involvement in substance abuse

Nasarawa State University, Keffi (NSUK)			Kaduna State University, Kaduna(KASU)		Grand Total	
Response	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Yes	120	66.3%	123	75.9%	243	71%
No	61	33.7%	39	24.1%	100	29.%
Total	181	100%	162	100%	343	100%

Source: Field Survey, 2015

Table two (2) shows the perception of the respondents as to whether there is a link between substance abuse and social status, the data from the two universities illustrates that there is a significant link between social status and substance abuse in both universities, this invariable means that parental social status influences students' social and financial status as well as determine their involvement in illicit activities such as substance abuse.

Table 3. Opinion on whether substance abuse result in crime within the campus in Nasarawa State University, Keffi and Kaduna State University, Kaduna.

Nasarawa State University, Keffi (NSUK)			Kaduna State University, Kaduna(KASU)		Grand Total	
Response	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Yes	160	88.4%	143	88.3%	303	88.3%
No	21	11.6%	19	11.7%	40	11.6%
Total	181	100%	162	100%	343	100%

Source: Field Survey, 2015

Table three (3) shows the opinion of the respondents as regards the resultant effect of substance abuses and crime rate at the various campuses. Significant population of the respondents unanimously share a common opinion that substance abuse on campus is one of the basic factor and the major cause of the incessant crime recorded on campus. The data shows that substance abuse and most campus crimes are inter-related as well as interwoven. Substance abuse can lead to crime behavior and involvement in criminal activities can also bring about abuse of substances.

ANOVA

Table 4. Show the Link between age of respondents and Factors that influence Substance Abuse.

	Sum of Squares	Df	Mean Square	F	Sig.
Between Groups	202.578	4	50.644	52.776	.000
Within Groups	333.943	348	.960		
Total	536.521	352			

Source Field Survey, 2015

Table four (4) shows the output from Anova, the data indicates the mean to be at 0.9 means square and the F-statistics at 0.5 this was measured at 95% confidence level with 0.5% level error, based on the above computation it simply means that there is a relationship between Age and the Reason given by the respondents for substance abuse, this invariably means that one's age can determine if he is likely to abuse substance. Therefore, age is a basic factor that influences substance abuse among students.

Discussion of Findings

The findings of this study revealed that the respondents' age plays a great role in the rate at which they are likely to abuse substance. In the same vein the study revealed that peer group influence is a leading factor for the continued rise in substance abuse and that age determined the reason for their involvement in substance abuse which means that age 16-25 years is the most delicate stage for the students. Hence they seem to be more gullible and vulnerable to crime and substance abuse therefore, age is a major social demographic factor that can influence or deter substance abuse as the age bracket revealed in the data analysis (Table 1) indicates significant influence of substance abuse amongst the youthful age with high level of peer pressure, and exuberances. This buttress McMaster and Keshav, (1994) words in their research on the prevalence of health-risky behaviours associated with adolescent illicit drug use "Unfortunately, adolescents and youth may underrate the harmful effects of unhealthy lifestyles". Greene, (1980) also reaffirm this in his research that age and peer pressure are the major reason why undergraduates engage in substance abuse when he asserted that "These unpleasant youthful activities are widespread in Nigeria and all over Africa, thus giving a lot of concern to the government and general public.

Furthermore, this assertion aligns with the previous studies separately carried out by Maithya (2009) and Kiiru (2004) in which they asserted that the common reasons for drug abuse amongst secondary school students in Kenya are mostly out of curiosity and acceptance by friends (peer pressure). That peer pressure was responsible for youths' consumption of drugs for the purpose of stimulating appetite for food.

It was also revealed that parent's social status plays a significant role in students' attitudes towards substance abuse (Table 2). This align with Ndom and Adelakun

(1996) argument that male children from an unstable family were associated with high risk of substance abuse, this argument is supported with clinical findings by Nyki (2015) which indicates that cannabis abusers are mostly young Nigerian men, including students, who have been deprived of parental supervision and warmth from infancy by either high class family who make all needs available but with little or no parental presence and bond, or middle and low class family who may have separated or divorced thereby leaving the custody of their youthful children in wrong hands or those who rely and expect their youthful children to contribute to financial improvement of the family. Awoyinfa (2012) further argued that the very high rate of alcohol use and abuse among students in secondary and tertiary institutions in Nigeria began from their childhood or early adolescence. To him, this account for why most youth, including students, who had hawked or still hawk for their parents, are themselves exposed to substance abuse

Finally, the finding of this study revealed that substance abuse result in crime within the campus and its environs (Table 3). This finding aligns with Aluede, (2000) assertion that drug abuse often leads to organized crimes and disruption of normal academic programmes. Such illicit behavior has led to increased secret cult activities in secondary schools and most Nigerian universities, which has been a source of threat to lives and properties. He further associated the impact of drug abuse among Nigerian youth with the loss of our societal values and ideals. Furthermore, this finding agree with the research of Melis (2005) when he asserted that drugs alter the normal biological and psychological functioning of the body, especially the central nervous system thereby subjugating substance abusers to crime willfully or reflexively. Majority of the Nigerian youths ignorantly depend on one form of drug or the other such as Tobacco, Indian hemp and so on. Students who abuse substance hardly do well in academic activities.

Conclusion

The over growing quest for substance abuse among students, is becoming very alarming, to the extent that one is tempted to ask why the persistent rise in this situation in spite of campaigns and seminars against substance abuse, no wonder just as the differential association theory put it, it can be presumed that quest for substance is not hiding but rather embedded in the social learning process, whereas the students learned such behaviours from their immediate environment because they socially interact among themselves, the problem of substance abuse if not curtailed then, one is tempted to say that the Nigerian universities environment will soon become a horde for different kinds of social ills.

Recommendation

1. There is a need for government to increase the statutory age for people qualified to buy substance from the normal 18 years to 35 years, by such

- restriction a potential user would have outgrown the delicate stage of youthfulness.
2. Also there is a need for government to intensify its campaigns on the dangers that comes with substance abuse by such doing it will shed more light on its adverse effects.
 3. In the same vein there is a need for government to recruit more personnel to join the NDLEA, to enable it perform its duty more efficiently, at least by having a unit that will be known as the Pharmaceutical police whereby their sole aim is to be checkmating the activities of Pharmaceuticals.
 4. Furthermore, there is a need for government to stop the sales of substance around universities environments thereby making its access difficult for the user
 5. There is serious need for Parents and guardians of children to create enabling environment for proper family bonding as well as follow up their wards academic progress from cradle to tertiary school in order to achieve early detection of such illicit behavior and curb it as early as possible.
 6. Finally, there is a need for government to pass it to law that all admitted students (before clearance) as well as graduating students (before exit clearance) must be tested against hard drugs just as we have it in the world of sports. This will make both parents as well as youth guide against the illicit use of substances.

Reference

- Abiodun, O.A., Adelekan. M.I., Ogunremi, O. O., Oni, G.A., and Obayan, A. O. S., (1994). *Psychological Correlates of Alcohol, Tobacco and Cannabis use Amongst Secondary School Students, in Ilorin, Nigeria, West African Journal of Medicine.* 13:213-217.
- Adelakan, .M.I., Ndom, .R.J.E., Makanjuma, .A.B., Parakoyi, .D.B., Osagbemi, .G.K., & Fagbemi O., (2010). *Trends Analysis of Substance use Among Undergraduates of University of Ilorin, Nigeria. African Journal of Drug and Alcoholic Studies* 1(1):39-59
- Adelekan, M. (1999). *Rapid Situation Assessment of the Drug Situation at Ehin – Eteri, Ijebu North Local Government, Ogun State Nigeria. Lagos: UNDCP. African Journal of Drug & Alcohol studies.*
- Andrews, J., Smolkowski, K., Hops, H., Tildesley, E., Ary, D., & Harris, J. (2001). Adolescent Substance use and academic achievement and motivation. *Paper presented at the Annual Convention of the American Psychological Association, San Francisco, CA* (ERIC Document Reproduction Service No. ED 337 733).
- Ajayi, I.A., & Ayodele. J.B., (2003). *History and Development of Education in Ado-Ekiti, Nigeria* (1sted).Petoa Education Publishers.

- Ajayi, I.A., & Ekundayo, H.T., (2010). *Contemporary Issues in Educational Management*, Lagos, Nigeria. Bolabay Publications.
- Akers, R. L. (2006). The Empirical Status of Social Learning Theory of Crime and Deviance: The Past, Present, and Future. In F. T. Cullen J. P. Wright K. Blevins (Ed.), *Taking Stock: the Status of Criminological Theory*(Vol. 15, pp. 37-76). New Brunswick, NJ: Transactions Publishing.
- Alemika, .E.O. (2008). Community Mobilization against Drug Abuse and Trafficking in Nigeria. *Paper Presented at Awareness Campaign, Seminar Organized by NDLEA 18th Dec. Abuja.*
- Aliyu, K. (2011). *Drug Abuse among the Youths in Nigeria A Sociological Analysis. African Journal of Modern Society*, vol. 2, No 2: 57-65. Department of Sociology Nasarawa State University, Keffi, Nigeria.
- Anthony, J.C., Etten, M.C., Newmark, Y.D. (1999). *Male to female Differences in the earliest stages of drug involvement, Addiction*, 642-644.
- Awoyinka, J.O. (2012). *An Investigation into the Incidence of Alcohol Usage and Abuse among Female Student of the University of Lagos, Nigeria, West Africa. Journal of Emerging Trends in Educational Research and Policy Studies*, 3(2), 174-178.
- Dagaci, A.M. (2011). *Drug Abuse and its Consequences on Academic Performance in Nigerian Educational Institutions. African Journal of Modern Society*. Vol 2, No.2:49-65. Published by the Department of Sociology Nasarawa State University, Keffi.
- Dambazau., A.B. (2012). *Criminology and Criminal Justice*. (2nded), Published in Nigeria by Nigerian Defence Academic Press Kaduna.
- Ekpenyong, S.N (2012) *Drug Abuse in Nigerian Secondary Schools*,(1sted). Wilberforce Island, Nigeria.
- Egbochuku, E.O., & Akerele, J.O. (2007). *Stimulant use as Correlate of Abusive Behavior Among Nigerian Undergraduates: College Student Journal*, 4(1): 50-58.
- Enakpoya, E. (2009). Prevalence of drug abuse among Nigerian adolescents: *Implication for Counseling. The Counsellor*, 26 (2).
- Fayombo, G.A (1998). *Differential Effectiveness of Communication and Social Skills Training in the Treatment of Drug Abuse Among the Secondary School Pupils in Ibadan, an Unpublished Ph.D Thesis, University of Ibadan, Nigeria. International Journal of Scientific Research in Education*, 5(3), 260-268.
- Gavin, L., Galavotti, C., Dube, H., McNaghten, A.D., Murwirwa, M., Khan, R., et al. (2006). Factors associated with HIV infection in adolescents in females in Zimbabwe. *Journal Adolescent Health*, 39, 596-598.
- Greene, B.J. (1980). *Sequential use of drugs and alcohol: A re-examination of the stepping-stone hypothesis. American Journal Drug Alcohol Abuse*, 7, 83-99.
- Haladu, A. A., (2003) Outreach strategies for curbing drug abuse among out-of-school youth in Nigeria. A Challenge for Community Based Organization

- (CBOS) youth and drug abuse in Nigeria. Strategies for counseling management and control. *American Journal Drug Alcohol Abuse*, 7, 67-78.
- Kiiru, D. (2004). *Youth in Peril: Alcohol and Drug Abuse in Kenya*. Nairobi: NACADA.
- Lyman, M.D. (2014). *Drugs in Society: Causes Concepts, and Control*. (7th ed). London: Routledge.
- Maithya, R.W. (2009). *Drug Abuse in Secondary Schools in Kenya; Developing a Programme for its Prevention and Control*. Central Division of Machakos District, Kenya. *Asian Journal of Medical sciences*, 8, 29-36.
- McMaster, J., Keshav, C. (1994). *Perceptions of normal alcohol use held by Zimbabwean high school students*. *Central African Journal of Medicine*, 5, 88-94.
- Melis, M., Spigga, S., and Marco, D. (2005). The Dopamine Hypothesis of drug Addiction: Hypo-dopaminergic state. *Int. Rev. Neurobiol.*, 63, 101-154.
- Ndom, R. and Adelekan, M. (1996). *Psychosocial correlates substance use among undergraduates in Ilorin University, Nigeria*. *East African medical journal*, 73(8), 541-547.
- Nkyi, A. (2015). *Adolescents' Use of Alcohol, Tobacco, and Marijuana: The Gateway to Other Drugs*. *International Journal of Psychology and Behavioral Sciences*, 5(4) 158-168.
- Odejide, A. O., (2000). Research, prevention and treatment of alcohol and drug abuse in Nigeria Problem and Prospects. *Paper presented at the 10th. Anniversary Lecture of CRISA JOS*.
- Odejide, A.O (1997). *Drug Abuse and Drug Trafficking in Nigeria: an Overview*. *Paper Presented at the Nigerian Training Course on Drug Abuse; University of Benin, Nigeria*.
- Onoja, O. M. (2010). *Prevalence of Substance Abuse Among Secondary School Students—A Comparative Study of Government and Private Secondary Schools in Jos* (1sted), CRISA JOS, Nigeria.
- Okoye, N.N (2001). *The Adolescents and Hard Drugs: a Psychological Concern*. A Publication of the Nigerian Society for Education. 14(8) 98-109
- Owoaje .E.T. & Bello .J. (2010). *Psychoactive Substance use Among Undergraduate Students of University of Ibadan*. Nigeria, *Tropical Journal of Health Science*: 17 (2):50-60.
- Oshikoya, K.A. and Alli, A. (2006). *Perception of Drug Abuse amongst Nigerian Undergraduates*. *World Journal of Medical Sciences*, 1(2), 133-139.
- Otieno, A.O. (2009). *Drug abuse in Kisumu town western Kenya*. *African journal of food and agricultural nutrition and development*, 9(3), 846-888.
- Pela, O.A. (1989). *Drug use and attitudes among College Students in Benin City, Nigeria*. *Journal of Alcohol and Drug Education*, 34(3), 5-13.

- Singh, G, Singh RP. (1979). Drugs on a medical campus I. Drug use among medical undergraduates. Drug and alcohol dependence, *Journal of Medical Sciences*4 (5), 391-398.
- Tsvetkova, A., and Antonova, A. (2013). The prevalence of drug use among university students inst. Petersburg. *Journal of Russia Psychology*,6(1), 86-94.
- UNODC, (2005). World Health Organization Expert Committee on Dependence Producing Drugs. *Fourteenth Report Urban Adolescent. Child Development*, 61, 2032-2046.
- Rasheed .K.O., &Ismaila .A.A. (2010). *Tracing the Path of Substance Use Among Students of Tertiary Institutions, in Lagos State. Nigeria. International Journal of Academic Research*: 2(1):216-223.
- Reddy .S.P., Resnicow .K, Omardien .R.G., & Kambaran .N.S. (2007). *Prevalence and Correlates of Substance Use among High School Students in South Africa and United States. American Journal of Public Health*. 97 (10):1859-1864.
- Suleiman .B.M. (2011). *Drug and Human Trafficking in Nigeria: A Sociological Analysis: African Journal of Modern Society*, vol.2, No.2:77-86. Published by Department of Sociology Nasarawa State University, Keffi.
- Sutherland, E. H. (1947). *Principles in Criminology*. (4th ed.). Philadelphia, PA: J. B. Lippincott.
- Sutherland, E. H., &Cressey, D. R. (2003). *A Theory of Differential Association*. (2nded). Los Angeles, CA: Roxbury Publishing Company.
- Tamen .F. (2008). Extending Support to Drug Abuse Victims and those Affected by Drug Problems. *Seminar Paper on Awareness of Illicit Drug Cultivation*. Abuja December, 8.
- United Nations Office on Drug and Crime*. (2010). *World Drug Report Vienna 2010*.
- Weil, A. (1973). *The Natural Mind. Another Way of Looking at Drugs and Higher Consciousness* (3rded). Boston: Houghton Mifflin.
- World Health Organization*. (2004). *Global Status Report on Alcohol*. Geneva 2004. www.kdsg.gov.ng/governmentofficial