
Psychoactive Substance Abuse and Drug Control: Implications for Socio-economic Development in Nigeria

Adekunle Morufu Abiodun

ABSTRACT

The study is on psychoactive substance abuse and abusive drug control in relation to socio-economic development in Nigeria. The Biopsychosocial Model of Vulnerability to Substance Abuse was adopted as relevant framework and as instrument to explain plausible causes of drug abuse. And the case study design and conceptual (psycho-historical) analysis of data sourced from both secondary and tertiary research information sources were the methodical approach for this study. Using this method, the paper systematically established the causes, indirect and direct consequences of drug abuse on socio-economic development and the effectiveness of drug control in Nigeria. From the analysis, this study found that the abuse of new psychoactive substance including Tramadol, Codeine, (just like abuse of other dangerous drugs) was increasing among the youths. And that, the abuse of psychoactive substances are gateway to mental health problems/disorders, social vices and crimes, impairments of social and work-related functioning; which have implications for socio-economic development planning as well as national security of the country. Also, it was found that there is need to strengthen the drug-control capacity in Nigeria. Based on these findings, the study recommends that there should be a paradigm shift in drug abuse and courier control to include among other measures; considering full implementation of protocols/laws to achieve national collaborative involvement, internationally coordinated action and expansion of drug control networks across all local government areas with a view to achieving a drug-free Country/ Nigeria.

Keywords: *Psychoactive substance (drug) abuse, drug control, socio-economic development, codeine, tramadol.*

INTRODUCTION

Drug is any substance that its intake has an effect upon the individual mind and body causing a behavioural change or functioning (Coleman, 2003). The Psychotropic (Psychoactive) substance also refers to hard drugs; as there are different meanings in drug control laws, government policies, medicine, and colloquial usage (Alfa, 2016). According to Robert (1996), drugs may be bought without prescription called over-the counter drugs and some are commonly prescribed (prescription drugs). Coleman (2003) further states that

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another name for drug abuse was psychoactive substance abuse and the preferred usage is drug misuse. This refers to a maladaptive use of a drug resulting in impairment of functioning or distress as manifested by a failure to perform adequately at home, school, or work. Therefore, on one hand, it is the repeated use of drugs in dangerous circumstances such as when driving, on the sports field, or operating machinery and on the other hand, it entails repeated Police/Drug enforcement agent arrests or serious marital or interpersonal relationship problems caused or aggravated by the drug use (Coleman, 2003).

Scholars have also observed that youths particularly the adolescent constitutes the risk group that are involved in this social problem. According to Adeyeye (2019), psychoactive substance abuse epidemic in Nigeria cut across all ages and strata of the society, it is more common among those within adolescent's age bracket. Based on personal experience, more males are involved than the females, though the level of abuse could vary across gender. It was reported that those within lower- income group are engaged than their counterparts within the middle and upper-income group (Doris, 1994). Furthermore, drug addiction among teachers is on the rise just like others vices threatening the education sector. This observation was made during the 2017-World Teachers' Day at the Nigerian Union of Teachers forum in Kebbi State where Governor of the state – Alhaji Atiku Bagudu expressed concern over the rising cases of drug addiction among teachers in the state (Nigerian Tribune, 2017).

According WHO, on the current trends Tobacco related deaths will rise from 4 (four) million a year in 1999 to 10 (ten) million by 2030, and 70% of them in developing countries. Half of these deaths will affect the middle-aged depriving them of 20 to 25 years of life (WHO n.d.) In a critical sense, many obstacles to socio-economic development like unemployment and under employment, slow economic growth among others are rooted in abusive use of drug. In a more general sense, abusive use of drugs often occurs at different settings including: first, in homes where family members may or may not be present; secondly, at social groups/schools in the midst of peers, friends or mates; thirdly, at workplace individually or in group with other colleagues; fourth, at various illegal drug lab and community neighbourhoods where drugs are being processed and sold as street drugs; and fifth, at extra-territorial illicit markets (often operated by drug runner/lord) where drugs are traded or

trafficked across nation's borders using both local and international connections (Adekunle, 2016). It is quite paradoxical that with the level of societal awareness of the dangers which drug abuse poses to socio-economic development and national security, government still lack the capacity to adequately tackle the so-called menace headlong. It therefore follows that findings from the present study could be useful to drug control/enforcement agents including drug czars, policy makers, NGOs, and relevant institutions in an attempt to make our society drug-free and overcome the negative social impact of drug abuse at Local, State and National levels.

Basically, abusive drugs, all have in common the property that they are psychoactive. Psychoactive simply refer to the ability of a drug to induce subjective effects on mood and feeling (Coleman, 2003). Drug abuse, also refers to as substance abuse, is the recurrent use of a drug despite the experience of problems caused by the drug use (Dodgen, 2000). Adeyeye, 2019 observes that drugs such as Tramadol, Codeine, and a number of dangerous drugs as well as prescription pharmaceutical medicines are commonly and routinely abused or consumed every day in Nigeria. Codeine, as an opioid-based medication for pain and cough are consumed with great risk of addiction. The misuse of codeine products contribute to severe health outcomes including Liver damage, Stomach ulceration, Respiratory Depression, coma and deaths (Adeyeye, 2019).

Scholar evidence from literatures on Behavioural Pharmacology indicates that attempts have been made to classify drugs with respect to their different properties and based on the effect of drug on the central nervous system (CNS) (Kandel, 1975). Thus, the following category further exemplifies such classificatory system:

- Narcotics/Opioids: Opium, Heroin, Codeine, Morphine, and Methadone.
- Psychotomimetics (also called Psychedelics or Hallucinogens): Marijuana, LSD and Mescaline.
- CNS Stimulants: Cocaine, Amphetamine and Caffeine.
- CNS Depressants: Alcohol, Barbiturates, Benzodiazepines, and Solvents inhalants.

Drug control concerns governmental intervention measures at national and international levels which may include preventive actions and control strategies enacted or put in place to be enforced by the drug law enforcements

agency (like NDLEA) or drug control and importation regulatory bodies (like NAFDAC and Nigeria Customs Service) (Giade, 2015).

Government control measures therefore include Nigeria's strides on drug control with the recent endorsement and launch of the National Drug Control Master Plan (NDCMP) 2015-2019. Giade (2015) further posited that the drug master plan is a new framework for reducing harm caused by drugs and for suppressing illicit drug production, supply and trafficking. Thus it represents drug control approaches with specific roles for each of the stakeholders. Also, the plan offers a platform for strengthening responses on drug control by Ministries, Departments, and Agencies.

National development which entails socio-economic development includes all aspects of the life of an individual and the nation. It is holistic. That is, a process of reconstruction and development in various dimensions of a nation and development of individual. Also it mean economic development.(WHO n.d.). Nwolise (2018) in a weekly live Nigerian Television Authority documentary programme commented that national development entails sustainable even social, economic, political and infrastructural development within a nation over a period of time. In this context, drug abuse and its impact in terms of social and economic costs is related to national and international planning particularly in areas of Gross National Product (GNP). It may follow that if hypothetical question are asked that; what are the social and economic drain of drug abuse problem on national development? Answer to such question could facilitate policy planning and as well inform development agenda in any nation.

Presently, there is more awareness of the problems of illicit drugs use and trafficking than ever before and has often be of concern to mental health and allied professionals. Typically, Professor Christiana Adeyeye at different times and fora/conferences held in Benin City, Kano City and at Kebbi State within the period of 2017 - 2019, and recently in 2018 during a live BBC documentary programme opined that the whole nation has come into awareness that was not as heightened as before this time with respect to the problem of Psychoactive Substance Abuse in Nigeria.

More importantly, the problematic issue is how to translate the awareness into constructive action, effective control and eradication of this social problem. This pose a major challenge, hence this study to provide answers to a number of research questions inter alia:

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- Does the government perceive drug abuse in terms of its direct and indirect negative consequences as impediment to socio-economic development?
 - Does the level of public awareness measure up with benchmark achievement targets of drug control and eradication plan on this societal menace?
 - Does the drug control strategies were significant component parts of government growth policies and macro- socioeconomic plans respectively?
 - Does the government have or lack the capacity to effectively and adequately evolve control strategies to achieve a drug-free Nigeria?

The main objective of this study is to review the abusive substance use and drug control in relation to socioeconomic development in Nigeria. Among other specific objectives the paper seeks were to;

- Review the causes, direct and indirect consequences/impacts of psychoactive substance abuse on the socio-economic development.
- Study how drug control connects with the socio-economic development of the nation.
- Evaluate the drug control measures.
- Offer workable policy recommendation(s) that could be of pragmatic use in achieving the desired target of a drug –free Nigeria.

Drug abuse is one of the so-called social problems in our nation and has become a reality that lives with us. Adeyeye (2019) observed that today in Nigeria (as a nation), there is an epidemic of drug abuse especially among our youths. The relative high frequency with which substance-related problems are encountered by Mental Health Professionals indicates that drug abuse harms people (both psychologically and socially), contributes to Psychiatric symptoms and people experiencing psychological problems are apt to use drugs abusively (Charles, 2004).

Risks factors could help to understand influences to use or abuse substances. Risk factors are those variables associated with increased likelihood of developing abusive substance use or disorder (Charles, 2004). It was further observed that use of psychoactive substance is more a function of external risk factors such as peer, socio-economic and family factors. Also, personal factors include biological, psychiatric, behavioural and emotional problems among others. In a similar vein, Adekunle (2016) states the followings as causes of drug abuse among young people/youths; peers and normative

influence of conformity, experimentation and trial use, predisposing personality and attitudes, performance - enhancement motive, evasion of therapeutic prescription, role of media/medic adverts, familial factors, and breakdown of societal values or social system, inadequate legislation and perverted implementation of laws on psychoactive drugs and its abuse.

Adeyeye (2019) identified factors such as dysfunctional social system, peer pressure, social media influence, poverty, unemployment, civil disobedience, smuggling and black market proliferation, prescription and dispensing control problem, weak enforcement and weak penalties of drug laws, diversion of legitimate exports to illicit use among others as reasons for abuse of drugs in Nigeria. Also, evidence from the 57th session of the Commission on Narcotics Drugs (CND) in 2014 and reported by Adeyeye (2019) shows that concerns were raised on the increase in the abuse of new psychoactive substances such as Tramadol not controlled under the International Drug Control Conventions. According to Adeyeye, Tramadol is a synthetic opioid analgesic used to treat moderate to severe pain, though remains most abused medicines among addicts and overdose effects includes; Tramadol use disorder, cramps, arrhythmias, coma and deaths.

Furthermore, literatures have also found research support for the impact of environmental factors on vulnerability to alcohol and drug dependency. Bry, Mckeon and Pandina (1982; 1987); Hawkins, Lishner, Jenson and Catalano (1987) and Kumpfer (1987) accept the hypothesis that the more risk factors, the greater the vulnerability to drug abuse. More importantly, from these studies the plausible indications are that drug abuse is introspectively complex and defies easy explanation. Also, Charles (2004) noted that ethical considerations further prevent researcher from conducting experimental researches that might help tease out various possible influences.

The importance of production of illicit drugs to an economy will vary from country to country. According to UNOTA 1993, income from drug trade is exorbitant in some countries. Furthermore, there is lack of accurate data on actual combined drugs and capital income relative to the size of country's economy due to the illicit nature of illegal drug industry.

However, available information has shown Nigeria as one of the countries in the world with the highest use of Tramadol relative to our population (Adeyeye, 2019). And according to Nigerian Tribune (2019) sideline news, the estimated value of containers/cartons of Tramadol

intercepted at various ports in Nigeria between 2017 and 2019 was put at 1.7 Trillion Naira. In her position as the Director General of NAFDAC however, commented that such a huge amount is then something else for the drug that inflicts a terrible illness on the productive Nigerian population.

Patrick (1993) states that the economic costs of drug abuse can be categorized as direct and indirect. Direct costs involve increased costs of Police, Courts; Treatment programmes, Military, Welfare payments to drug addicts, crime and violence, poverty and unemployment, as well as increased security measures by businesses. Indirect costs include the displacement of legal industries, diminished control over the economy, spending money for drug and inappropriate use of money gained from drug sales, fiscal problem related to inability to tax the drug economy. Succinctly put, Economic commentator have argued that these economic costs have implications on macro-economic planning: as they could contribute to skewed macro-planning, in view of their effects on inflation, unemployment, economic growth and economic behaviour of consumers (Patrick, 1993).

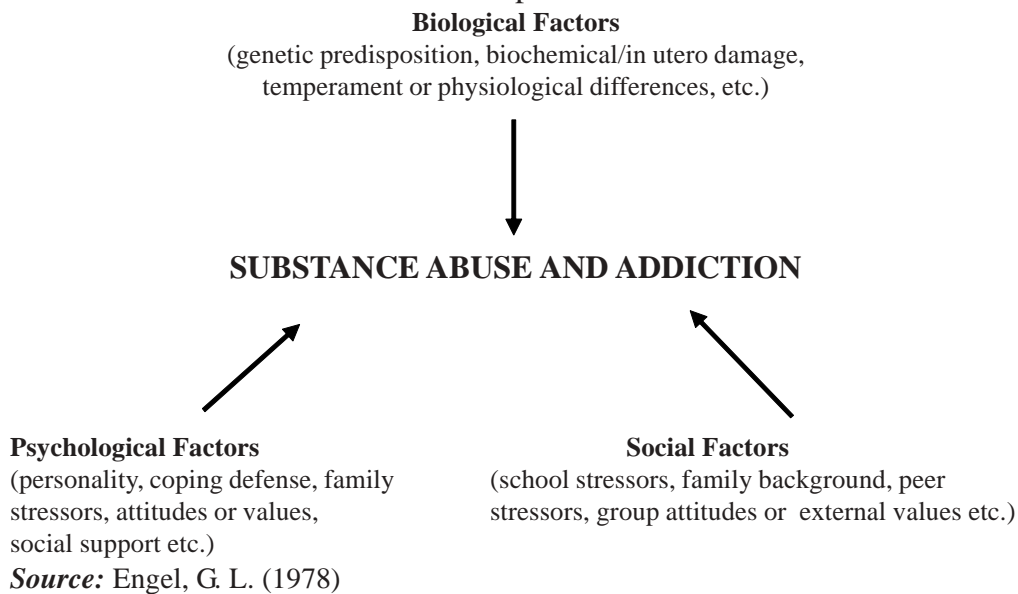
In relation to the above, Adekunle (2016) identifies both immediate and long term (legal, economic, social and psychological) impacts of drug abuse on people and the nation. These includes disobedience to national and international laws, increased deaths and crimes at national and trans borders level, social/civil disorderliness, economic sabotage effect, significant impairment of people social and occupational functioning, gateway to social and mental health problems like alcoholism, a-motivational syndrome among others, and also impacting negatively on country's image and youth development. The foregoing therefore, suggested that there has been limited recognition on government's part that drug- related issues and the booming illicit drug industry spreading over different locations across the country should be given desired priority in view of its endemic nature.

The literature review method adopted for this study was to enable the researcher obtain relevant information and demonstrate how the adopted models are applied to the phenomenon understudied. Also, the paper reviews the biopsychosocial model and its historical roots, specific application to drug abuse (addiction), as well as related literatures on some of the research key areas. Specifically, secondary data generated were used for the study from relevant literatures, as well as other research information sources were adopted in descriptive term as methodical approach for the present study.

THEORETICAL FRAMEWORK

In the present study The Biopsychosocial Model and Kandel Model were adopted as relevant framework and instrument to explain plausible causal factors of drug abuse in our society on the basis of present indications and past experiences in social engineering context.

The Biopsychosocial Model of Vulnerability to Substance Abuse is the most widely accepted model of substance abuse and addiction. The model is a reasonable way to incorporate most causes of alcohol and substance abuse into a single macro-framework and is one resourceful macro-theoretical framework helpful in organizing etiological factors of substance abuse. The model suggests that Biological, Psychosocial and Social factors have significant contributions to substance abuse as depicted below:



Researchers, majorly in behavioural medicine have recently promoted biopsychosocial models applied to health sciences, in response to the need for more complex, interactional and contextual paradigms. They believed a major paradigm shift is moving the health sciences away from single cause linear model to a multi-cause interactive model (Schwartz, 1982).

Judging from the above model, it should be clear after reviewing the list of risk factors, that Biological, Psychological, and Social factors could contribute significantly to substance abuse. Meaning that, these cluster variables are also temporally ordered by major sources of influences



developmentally as the child matures. Empirically, family factors are primary and earliest in their sustained impact on the infant and youth. As the child matures and goes to school, school and community environmental factors have more impacts. Eventually peer influences predominate, becoming the final common pathway to alcohol and drug use in youths (Elliot, Huizinga, and Ageton, 1989; Kumpfer and Turner, 2009). Evidently, a biopsychosocial model of addiction is a very useful conceptual framework for integrating the different causes of alcohol and drug abuse.

Kandel (1975) developed a stage model of progression of Drug Use. The model suggests that substance use typically begins in adolescence, and it follows a fairly predictable pattern. This is observed in two longitudinal surveys, carried out by Kandel (1975), based on random samples of high school students in New York State. The surveys indicate four stages in the sequence of involvement with drugs; beer or wine, or both, cigarette or hard liquor; marijuana; and other illicit drugs.

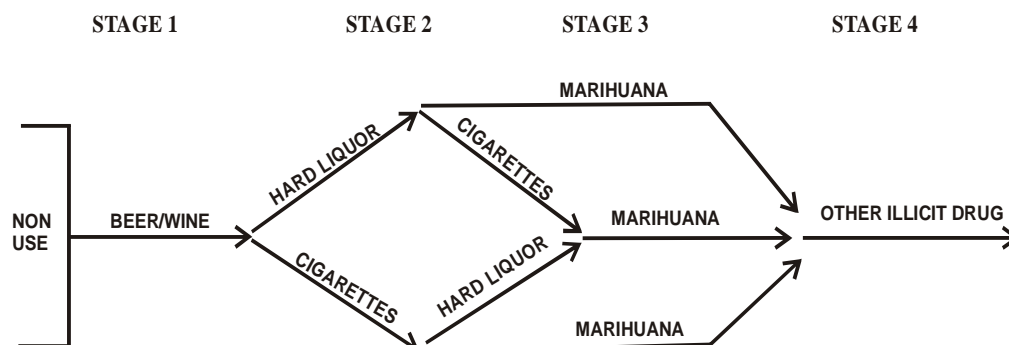


Figure 1: Major changes in adolescent involvement in drug use.

Source: Kandel (1975)

Adolescents tend to start using substances that are legal and widely available to adults: Alcohol and Tobacco. The legal drugs are necessary intermediates between nonuse and marijuana. These drugs are the starting point for substance abuse, also referred to as gateway drugs which majority of adolescents experiment with at least one time. Schematically, the model's stages of progression of drug use are as follows: (1) Beer or wine use, (2). Hard liquor or cigarette use, (3) Marijuana experimentation, (4) Alcohol abuse, (5) Prescription drug use or misuse, and (6) Opiates and other illegal drug use.

The above suggests that as the stages advance, progressively fewer adolescents are found in each category. For example, Alcohol will be tried by



approximately 9 out of 10 in their senior year in High School and Cigarette by approximately 6 out of 10 students in senior year. Opiates at the last stage of the model will be tried by only 1 out of 100 students in senior year (Kandel, 1975). According to National Institute on Drug Abuse (2014), adolescents experiment with drugs or continue taking them for reasons such as:

To fit in: Many teens use drugs “because others are doing it” - or they think others are doing it - and they fear not being accepted in a social circle that includes drug-using peers.

To feel good: Abused drugs interact with the neurochemistry of the brain to produce feelings of pleasure. The intensity of this euphoria differs by the type of drug and how it is used.

To feel better: Some adolescents suffer from depression, social anxiety, stress-related disorders, and physical pain. Using drugs may be an attempt to lessen these feelings of distress. Stress especially plays a significant role in starting and continuing drug use as well as returning to drug use (relapsing) for those recovering from an addiction.

To do better: Ours is a very competitive society, in which the pressure to perform athletically and academically can be intense. Some adolescents may turn to certain drugs like illegal or prescription stimulants because they think those substances will enhance or improve their performance.

To experiment: Adolescents are often motivated to seek new experiences, particularly those they perceive as thrilling or daring.

Based on the review of literatures, this study revealed the pattern of drug abuse, setting where drugs are abused, causes and attendant consequences associated with drug abuse. Though, it was found that there was data gap on certain drugs abuse and dearth of information on some areas of identification of drug abuse problem. It was discovered that that national drug enforcement and control are being jeopardized and circumvented due to human factor many times locally and internationally not minding the socio-economic implications of drug abuse. This singular trend has made preventive and total eradication intervention strategies ineffective and a mere futile exercise. This research result conforms to Adeyeye (2019) lamentation, that in Nigeria, as in many Africa and Middle East countries there are signs of expansion of the markets for Tramadol being abused.

Another significant result of this research was that the connection between drug abuse and development is not predictable. Expectedly, drug abuse in view of being an impediment to socio-economic development need be an integral part of economic growth and basic needs strategies of macro-economic planning of the nation. As Doris (1994) observed that drug control and drug abuse consideration were not often viewed as issues of primary concern for development planners, even in the context of programmes following a basic need strategy. This implies that there has been limited recognition of drug-related issues in economic policy planning, social and criminal justice administration.

Dr. Theresa Tam, the Chief Public Health Officer of Canada has design a pyramid (Figure 2), which represents public health interventions for the prevention of problematic substance use in youth. There are 4 levels to the pyramid.

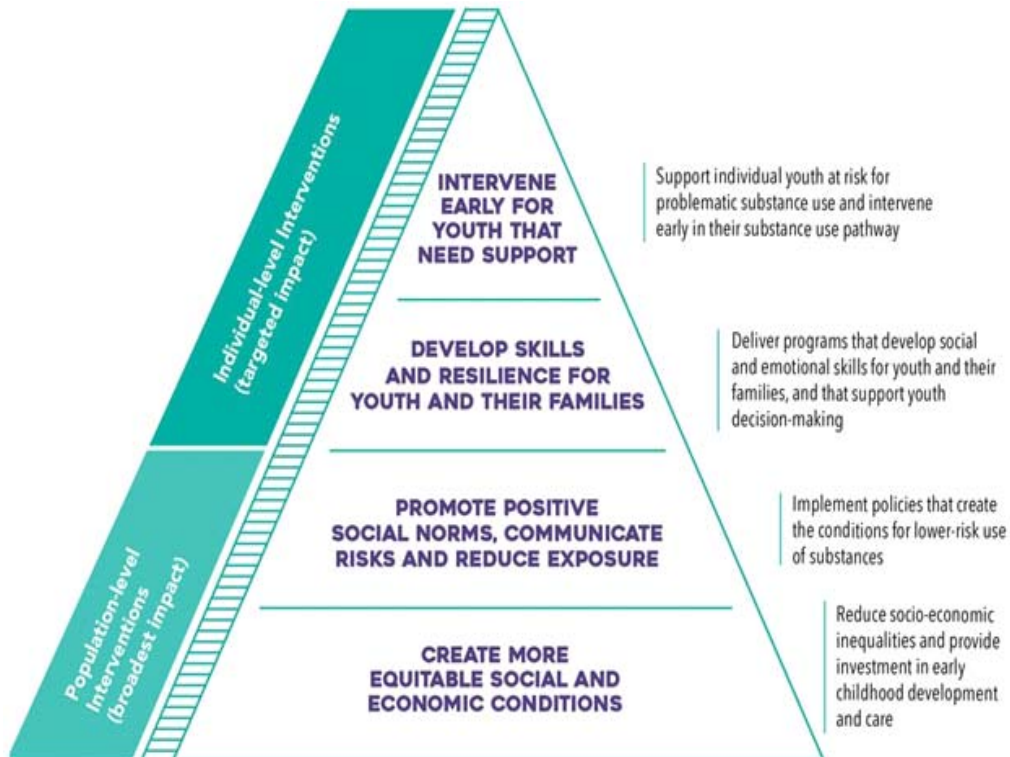


Figure 2: Public Health Interventions for the Prevention of Problematic Substance Use in Youth. Source: Tam (2018)

The pyramid is classified into two interventions heights. These are the interventions at population level and interventions at individual level. The interventions at the bottom half of the pyramid, also called population-level interventions, are those that have the broadest impact. They (1) create more equitable social and economic conditions that is, reduce socio-economic inequalities and provide investment in early childhood development and care); and (2) promote positive social norms, communicate risks and reduce exposure (for instance, implement policies that create the conditions for lower-risk use of substances). The interventions at the top half of the pyramid, also called individual-level interventions with a targeted impact. They: (3) develop skills and resilience for youth and their families (such as, deliver programs that develop social and emotional skills for youth and their families, and that support youth decision-making); and (4) intervene early for youth that need support (for instance, support individual youth at risk for problematic substance use and intervene early in their substance use pathway).

CONCLUSION AND RECOMMENDATIONS

In the light of the literature review, drug abuse has remained one of contemporary endemic social problem pervading Nigeria. The epidemic proportion of drug abuse is more rampant in major Nigerian cities where reported series of arrests and interceptions have been carried out by drug enforcement agents. Evidently, the identified risk factors of drug abuse that were indicated as direct and indirect predictor variables, also suggests pattern of psychoactive substance abuse in adults and adolescents. Besides the associated socio-economic harms of psychoactive substance abuse, mis-use of drugs endangers lives of many Nigerian youths who constitute significant risk-group. After all, drug abuse could as well jeopardize the implementation of government's macro-plans, policies and programmes, threatens country's image and national security. From all indications, it is discerning that difficulties arising in certain areas of abuser's life such as alcoholism, a motivational syndrome to mention a few; are of more importance to researchers and treatment professionals, than other areas of drug abuse/misuse assessment. The followings suggestions were proffer from this study:

1. That there should be continuous active involvement between government/agencies and non-governmental organizations (NGOs-

- local & international) on one hand, and between government and relevant societal institutions (family, mass media & religious-educational) on the other hand, particularly in areas of resource mobilization and capacity support for substance abuse and drug control covering drug education and advocacy campaign for prescriptive use among abusers.
2. That government or its relevant agencies should consider putting in place of drug czar and rehab machinery with viable drug Information, Education, and Communication (IEC) centre in all local government areas across the country. This could serves as holistic national response comparable to the priority placed on control of HIV/AIDs.
 3. That government should consider incorporating drug control measures as a component thrust of its socio-economic development planning in view of impact of abusive drugs on nation's economy. This approach would provide avenue for pairing drug abuse prevention/control with socio-economic development planning.
 4. That government should consider full implementation of all international laws/protocols on drugs control and drug-related crimes to achieve internationally coordinated action. Also, should seek collaborative support from donors and assistance organizations as an effective measure to combat the international connections/transborder activities of drug pushers, runners and lords.
 5. That government should proactively encourage continual integrated youth development programmes as a sublimation mechanism for engaging youths and channeling their mind from abusive use of drugs.
 6. That government and its agencies should consider use of biological control as a way of eradicating illicit drug production and also use of specified biological testing comparable to the practice in sports arena in a number of workplaces, offices, schools and even correctional facilities within the country.

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