Demographic Factors and Sexual Behaviour as Predictors of Psychoactive Substance Use among Adolescents in Abuja, Nigeria

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Abstract

Demographic Factors such as Locality, Economic, Educational Status and Sexual Behaviour as Predictors of Psychoactive Substance Use among Secondary School Adolescents of Amac Ward, Abuja Nigeria, was examined using the cross-sectional design. The study measured three variables and examined their predictive use of Psychoactive substance among senior secondary school adolescents, the variables studied were locality of rural, urban and suburban, economic status of rich, poor and average, educational status of school dropout, JSCE, and SSCE, and sexual behaviour. Data were collected and analyzed using Univariate Analysis of Variant, One Way Anova and Regression analysis. The findings revealed that, each of the predictor variable of locality had significant relationship with psychoactive substance use [f(34,226)=1.61; p<.05], economic and educational status [f(1,259)=2.28; p<.05], and sexual behaviour [f(1,260)=614.71; p<.05]. It is recommended that, parents and teachers should vet the friends and social circles of the students, as the biggest reason students start using drugs is because their friends utilize peer pressure. Punishment methods which are associated with crisis management approaches which are reactive in their policies and locate the problem in students should be used. Health professionals are to be involved includes social services and family support teams, police, probation, education, and housing authorities, as well as voluntary drug workers. Effective skill program which helps to improve self-esteem, and reduce stress and anxiety such as the educational programme interventions should be employ.

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1. Introduction

During adolescence stage, young people experience a vast amount of changes in their physical, emotional, and social maturity. During this stage, outside influences are particularly capable of affecting teenagers' thoughts and behaviours (Oladeji & Ayangunna, 2017). One influence that has proven to have a considerable effect on teenagers which we will discuss is environment, status and sexual behaviour. Adolescence is a time of transformation in many areas of an individual's life; a time for individuals to make important decisions about their commitment to academics, family, and perhaps sexual behaviour (Oladeji & Ayangunna, 2017). At this time, there are a lot of experimentations from substance use as regards to their locality (environment), economic and educational status of parents and caregivers as well as engaging in certain sexual risk activities with peers and friends.

Foremostly, it is a substance which is a chemical used in the treatment, cure, prevention or diagnosis of disease or to enhance physical and mental well-being (Kring, Davison, Neale & Johnson, 2007; Pressly & McCormick, 2007). The use of alcohol, tobacco and other substances constitutes one of the most important risk–taking behaviour among adolescents and young adults in secondary schools (Sadock & Sadock, 2003). Despite worldwide concern and education about psychoactive substances, many adolescents have limited awareness of their adverse consequences. Curiosity, social pressure and peer group influence are reported to be primary reasons for this substance misuse (Wright & Pearl, 1995).

According to the World Health Organization (WHO, 2014), substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. It is now a major Public Health challenge all over the world. Complications of substance abuse by young people are grave including: increased odds of engaging in risky sexual behaviour such as sexual violence and rape, personality disorders, criminal tendencies and drug dependence among others. Globally, the harmful use of alcohol alone has been estimated to result in 3.3 million deaths each year and at least 15.3 million persons worldwide have been documented to be suffering from drug use disorders (WHO, 2014).

Around the world, studies have been conducted on the use of psychoactive substance among adolescent. An estimated 13 million youths aged 12 to 17 become involved with alcohol, tobacco and other substances annually (Lennox & Cecchini, 2008). In general, tobacco and alcohol are the most frequently used substances by young people, with cannabis use accounting for 90% or more of illicit substance use in North America, Australia, and Europe (Alexander, 2001). Furthermore, the Canadian Centre on Substance Abuse (2002) conducted a survey which indicated that the average age for first users of substances was 12 years. About 64.7% of the youth in grades 7 to12 reported the lifetime use of alcohol, 29% cannabis, 43% cocaine powder and less than 4% other substances including heroin, ketamine and crystal methamphetamine (Canadian Centre for Substance Abuse, 2002). According to Plüddermann, Parry and Bhana (2007) over 75% of patients younger than 20 years are black, a significant increase over previous periods; 88% are male and 12% are female. About 31% of patients reported swallowing their substances when alcohol is excluded. Almost 92% report smoking as their mode of use. Only 1% of patients reported that they injected drugs. Blacks constitute the majority of patients in treatment centres, followed by whites, coloureds, and Asians (Plüddermann et al., 2007).

In Nigeria, Fatoye and Morakinyo (2002) assert that earlier studies on students' substance use were largely hospital–based and confined to selected regions of the country, However, in the past 10-15 years, such studies have taken the form of field work employing epidemiology techniques so as to provide more comprehensive information related to types, pattern of use and psycho-social correlates in drug use among secondary school students. Research by Nte (2008), found that 37% of the students in Bayelsa State were abusing tobacco products through use. Tobacco products are readily available in Nigeria. Research in Australia revealed that bhang smoking leads to the use of other more serious drugs. In the Bayelsa it was found out that 5.3% of the students were smoking bhang.

Considering the use of this substance is locality; Nwankwo, Obi and Kanu (2003) assert that differential environmental influence have been suggested to account for the disparity in urban and rural children's and adolescents risk performance behaviour on varied tasks, as well as other related behaviours among which morality is one. Urban communities are characterized by a heterogeneous population and impersonal secondary relationship, they have a predominantly non-agricultural occupation and a high degree of socialization, resulting in a complete division of labour on the other hand, rural environment is characterized, ignorance and conservationism (Amazue, 2006).

More importantly, children from this area seem to be of relatively low socio-economic parents (Ozioko, 1986, cited in Amazue, 2006). Alcohol use for instance in Nigeria dates far back in history. Alcoholic infusions in the pre-colonial period consisted mainly of palm (or distillates of palm wine example "ogogoro") and fermented cereals. Elaborated alcohol consumption by the priests and pouring of libations formed essential part of many religious ceremonies and rituals. In the main, alcohol played a social harmonizing role, as has been shown among Kofyar people near Jos (Netting, 2004) as well as carnival drinking during important social events was characteristic of many traditional Nigerian communities. The pattern and extent of drinking changed radically as the slave trade. Lynn-Pan (2005) in her monograph gave a good description of how these economic contracts with European colonialists led to an upsurge in alcohol consumption in African countries and mostly Nigeria.

According to Lynn-Pan (2005), alcohol was part and parcel of the commerce which for centuries constituted the basic tie between Europe and Africa. It was an article of the barter system through which European goods were exchange for African slaves. Looking closely why adolescent engage in substance use and abuse is the economic and educational status of such environment. Owolabi and Emeka (2012) validated that family type, size, socio-economic status and educational background play important role in children's educational attainment, social integration and interactions. Also, Ajila and Olutola (2000) further stated that the economic status of homes affects the individual since the parents are the first socializing agents in an individual life. Although, the United States Department of Education (2000) discovered that the relationship between poverty of parents and students' act is not simple and direct. It confirmed that poverty is an important factor accounting for differences in performance, substance use and achievement across rural, sub-urban and urban districts. From this, Shittu (2004) asserted that poor parental care with gross deprivation of social and economic needs of a child usually leads to poor and dangerous act of the child or adolescent. Not forgetting Uwaifo (2008) who avowed that family background of a child affects his reaction to life situations and his level of performance with peers and in decision making.

Ndem in Omirin and Adeyinka (2009) also proved that parental support financially and morally has been found to be potent in improving students' performance. Ebenuwa-Okoh (2010) opined that if the finances of students are not adequate, the situation may affect their academic performance. Above all according to Cole and Scribner (1974), cited in Amazue, (2006), a child's method of perception, memorization and thinking are inseparably bound to the patterns of activity, communication and social relations of the adult in which the individual is socialized. Thus, the environment in which we are brought up has a lot to offer in the explanation of our varied behaviours and attitudes. This, in other words, postulates that moral behaviours or immoral behaviours exhibited by adolescents has so much to do more with locality which they were brought up.

Adolescents from different socio-economic background manifest differently in their perception and attitude towards similar social and mental problems whereas most adolescents from high socio-economic background will always want to maintain such status by guarding against anything that many bring disgrace to their parents. Some adolescents from low-income family background would do anything seemingly possible to crave high status for them (Denga, 2002). On the other hand, there are some adolescents from high socio-economic background whose needs are not met by their parents as a result of their parent's ideological view about life. Such adolescents would do anything possible to live up to the economic status of their parents. Nevertheless, there are some adolescents from low-income family who would rather see it as a challenge to work hard in their areas of

endeavour in order to change their family status (Akpama 2007; Hodges 2001). In her research, Vivian (2019) aimed to highlight the impact of socio economic status on adolescents and youths' health risk behaviors in Enugu Nigeria. Risk behaviours among the youth are associated with considerable negative health and developmental outcomes. It was a cross-sectional descriptive study. Data was collected from students in 2 tertiary institutions, who were selected consecutively using semi-structured interviewer administered questionnaire. Data was analysed using SPSS version 20.0. The level of statistical significance was set at $p<0.05$. There was a high prevalence of priority health risk behaviours among the adolescents and youths. 35.8% drove recklessly, 41.2% used alcohol and 4.4% used "hard" drugs. 34.6% had unprotected sex, 18.7% smoked cigarette, 23.8% practiced unhealthy dietary behaviours while 38.1% indulged in sedentary lifestyle. Age, gender and socioeconomic class had profound influence on the practice of risk behaviours. The age range 15-24 years and the male gender were more involved.

Regarding the sexual aspect considered in this study, the human sexual behaviour is a diverse phenomenon. It occurs in different physical locations and social contexts, consists of a wide range of specific activities and is perceived differently by different people (Madan, 2013). An individual engages in sexual activity on the basis of a complex set of motivations and organizes that activity on the basis of numerous external factors and influences (Janet, 2003). A surge of sexual interest occurs around puberty and continues through adolescence (teenage years 13 to 19). This heightened adolescent sexuality may be caused by a number of factors, including bodily changes, sexual hormones, social forces, and rehearsal for adult gender roles (Eder, Evan & Stephen, 1995 cit Madan, 2013). Just as Darroch, Landry and Singh (2000) have pointed out that a sexually explicit movie is one that exposes young people to adult issues at a vulnerable age. Late adolescence (15-19 years) is particularly important as sexual debut and experimentation often take place during this period (Dixon-Mueller, 2009). Early sexual activity is associated with the risk of contracting the Human Immuno Deficiency Virus (HIV), other sexually transmitted diseases (STDs) and unplanned pregnancy (Ersin & Bahar 2009, Papaharitou, Nakopoulou, Hatzichristou, & Moraitou, 2011). A study was carried out by Emma, Walker, Zaba and Collumbian (2009).

The National Population Commission (2015) reported a 68.8% of sexually active respondents, more than in the report of the 2013 Nigeria National Demographic and Health Survey (NDHS) which indicated a 48.9% of sexually active youth. This may probably be due to the fact that the NDHS data is on youth (i.e., a group of individuals aged 15 to 18) while the respondents in the NPC study were a group of individuals aged 18 to 24. It is worthy to note that only 35 (36.8%) of the sexually active respondents in the study had only one sexual partner in the past one year. 63.2% majority were having sex with multiple partners, with 27.4% having sexual intercourse with as many as six or more partners.

Louis, Shittu, Ajayi, Ameen, Abdullateef and Yusuf (2019) in their research on sexual behavior among adolescent senior secondary school students in Nigeria found that a majority, 305 (69.5%) of the students were between 16 – 20 years old. The major source of information was from movies, 42.5%, and the internet, 24.7%. Twenty-three percent (23.1%) had poor knowledge of high-risk sexual practice. Thirty-eight percent (38.1%) did not consider indiscriminate sexual intercourse as high-risk sexual practice while 27.9% still believed that unprotected sexual practice is safe. Thirty-four percent (34.2%) did not know that sex with multiple partners is a high-risk sexual practice while 34.4% did not know that oral–genital sex is unsafe. Over thirty-two (32.9%) perceived that engaging in sex made them mature among peers. Twenty-four (24.7%) did not perceive any danger in keeping multiple sexual partners while 15.3% would still engage in unprotected sex after drug use. Although, social rules and prohibitions regulates individuals' nature, it is not only how much wealth a family has that determines the healthy personality of the adolescents. UNAID (2002) and Alachi & Odey (2001) both discovered that economically disadvantaged adolescents are prone to ignore the dangers of substance use and unprotected sex by engaging in high-risk sex behaviour of drugs abuse in order to satisfy their societal demands. Adolescents' substance use is influenced by their locality, economic and educational status, sexual behaviour.

2. Method

The cross-sectional design was used for this study; it is ideally suited since it allows for obtaining data from a group of people at the same time thereby curbing the error of misplacement. The study was carried out in three secondary schools in Abuja, which comprises of Jikwoyi, Orozo and Karchi. According to the National Bureau of Statistic (NBS, 2011), it has a total population of 776,298; the highest among other local government area of Abuja. AMAC has 12 wards which include City Center, Garki, Gui, Gwarinpa, Jiwa, Kabusa, Karshi, jikwoyi, Orozo and Wuse.

2.1. Participants

Participants comprised of randomly selected adolescents from three secondary schools which were Government secondary school, Karchi; Government secondary school, Jikwoyi and Federal Science and Technical College Orozo, all in Abuja Municipal Council (AMAC). Census according to age distribution of 10-19 years; in detail, the age groups were as follows: 13 years old – 27 (10.3%); 14 years old – 23 (8.8%); 15 years old – 37 (14.1%); 16 years old – 51 (19.5%), 17 years old – 31 (11.8%); 18 years old – 52 (19.8%); and 19 years old – 41 (15.6%). The gender distribution was: 142 were males and 120 were females. Regarding religion: 225 (85.9%) were Christians and 37 (14.1%) were Islamic. As regards their locality: rural – 129 (49.2%); urban – 26 (9.9%) and suburban – 107 (40.8%). Educational status: informal – 34 (13.0%); dropout – 45 (17.2%); FSLC – 74 (28.2%); and SSCE – 30 (11.5%). Considering economic status, 33 (12.6%) were poor, 144 (55.0%) were average, and 84 (32.1%) were rich.

The purposeful random sampling technique was used (Kerlinger & Lee, 2000; Liamputtong & Ezzy, 2005) in selecting three sample wards from Abuja Municipal Council for this study. This was done because of the characteristic of the population and the objective which the study is set to achieve. This sampling method was based on my judgment regarding the characteristics of a sample. The strategy was to select participants that are information rich and illuminative, that is, they offer useful manifestations of the phenomenon.

2.2. Instruments

The Demographic Form: This was used in assessing data as regard to the locality, economic and educational status of participants

The Drug Abuse Screening Test (DAST-10) Harvey (1982): This was used in collecting information by a 10-item using the 5-point Likert rating scale. It is the measure of the degree to which the participant has used drug other than those required for medical reasons.

The Surveillance System and the Youth Risk Behaviour Survey Scale by (Kolbe, 1990): This was used to gather data from participants on the frequency of sex engagement in one of its categories, and also if they have ever been sex assessed.

2.5. Procedure

The participants for the study were administered the questionnaires in their various locations with the help of two research assistants. The administration of the questionnaires to the participants took the researcher three working days to complete. The collected questionnaires were scored and the data obtained from them were analysed to answer the research questions. On the whole, 262 copies of the questionnaires were distributed and all were returned fully filled giving a return rate of 100%. Further, descriptive statistics involving frequencies, mean and standard deviation were used to summarize the demographic data of the respondents. On the other hand, inferential statistics involving regression Univariate Analysis of Variant, One Way Anova and Regression analysis were used in testing the hypotheses.

3. Results

The Result in table 1 shows that, locality significantly predicts the use of psychoactive substance among adolescent [f(34,226)=1.61; p<.05]. The result further showed that, for the urban community [x=27.72; p<.05], 27.27% accounted for the highest predictor of psychoactive substance use, for the suburban community, [x=27.66; p<.05] with 27.66% accounting for the second highest predictor of psychoactive substance use, while for the rural community [x=25.82; p<.05], 25.82% accounted for the lowest predictor of psychoactive substance use. Therefore, the hypothesis one was confirmed.

Table 1. Univariate Analysis of Variance showing locality as predictor of psychoactive substance use among adolescent in Amac Ward, Abuja Nigeria

Variable	N	X	SD	df	F	Sig.
Rural	129	25.82	3.44			
Urban	25	27.72	3.67	34,226	1.61	.023
Suburban	107	27.66	3.36			

The Result in table 2 which revealed that Economic and Educational Status significantly predicts psychoactive substance use among adolescent [f(1,259)=2.28; p<.05]. The results further indicated that economic and educational status accounted for 15.2% of the variance of psychoactive substance use. Therefore, the hypothesis two was confirmed

Table 2. One Way Anova showing Economic and Educational Status as predictors of psychoactive substance use among adolescent in Amac Ward, Abuja Nigeria

Variable	X	SD	R	R^2	df	F	Sig.
Economic Status	26.76	3.53					
			263	.152	1,259	2.28	.023
Educational Status	26.76	3.54					

The result in table 3 confirmed that Sexual Behaviour significantly influence psychoactive substance use among adolescent [f(1,260)=614.71; p<.05]. The results further show sexual behaviour accounted for 26.76% of the variance of psychoactive substance use. Hence, hypothesis three was confirmed.

Table 3: Regression analysis showing sexual behaviour will significantly predict psychoactive substance use among adolescent in Amac Ward, Abuja Nigeria.

Variable	R	R^2	df	F	β	t	Sig.
Constant	260	26.76	1,260	1,260		45.164	*
Sexual Behaviour					.838	24.783	**

*p<.01, **p<.05

4. Discussions

Hypothesis one established that locality significantly predicted the use of psychoactive substance among adolescent in Amac ward, Abuja Nigeria. Nwankwo, Obi and Kanu (2003) assert to the view that differential environmental influence accounted for the disparity in urban and rural children's and adolescents' risk performance behaviour on varied tasks, as well as other related behaviours among which morality is one. Urban communities are characterized by a heterogeneous population and impersonal secondary relationship, they have a predominantly non-agricultural occupation and a high degree of socialization, resulting in a complete division of labour on the other hand, rural environment is characterized by ignorance and conservationism (Amazue, 2006).

According to Plüddermann et al. (2007), over 75% of patients younger than 20 years are black, a significant increase over previous periods; 88% are male and 12% are female. About 31% of patients reported swallowing their substances when alcohol is excluded. Almost 92% report smoking as their mode of use. Only 1% of patients reported that they injected drugs.

Hypothesis two revealed that economic and educational status significantly predicts psychoactive substance use among adolescent. Owolabi and Emeka (2012) validated this that family type, size, socio-economic status and educational background play important role in children's educational attainment, social integration and interactions. Also, Ajila and Olutola (2000) further stated that the economic status of homes affects the individual since the parents are the first socializing agents in an individual life. Conclusively, Uwaifo (2008) confirmed that family background of a child affects his reaction to life situations and his level of performance with peers and in decision making.

Hypothesis three validated that sexual behaviours significantly influence psychoactive substance use among adolescent. This agrees with UNAID (2002) and Alachi & Odey (2001) who both discovered that economically disadvantaged adolescents are prone to ignore the dangers of substance use and unprotected sex by engaging in high-risk sex behaviour of drugs abuse in order to satisfy their societal demands. This further follows in the research of Louis, et al. (2019) on sexual behavior among adolescent senior secondary school students in Nigeria. The major source of information was from movies, 42.5%, and the internet, 24.7%. Twenty-three percent (23.1%) had poor knowledge of high-risk sexual practice. Thirty-eight percent (38.1%) did not consider indiscriminate sexual intercourse as high-risk sexual practice while 27.9% still believed that unprotected sexual practice is safe. Thirty-four percent (34.2%) did not know that sex with multiple partners is a high-risk sexual practice while 34.4% did not know that oral–genital sex is unsafe. Over thirty-two (32.9%) perceived that engaging in sex made them mature among peers. Twenty-four (24.7%) did not perceive any danger in keeping multiple sexual partners while 15.3% would still engage in unprotected sex after drug use.

5. Conclusions and recommendations

Effective programs help improve self-esteem, and reduce stress and anxiety such as the educational programme interventions; this drug prevention programmes known as life skills training have been found to be successful with young adolescents. Life skills training is based on findings that most adolescents' first use drugs in social situations and that their decisions are influenced not just by one factor but a variety. Effective programs focus on enhancing problem solving skills and aiding students to evaluate the influence of the media.

Also, these skills are taught using a combination of methods including demonstration, practice, feedback and praise. Another proven approach is training designed to teach skills to confront a problem-specific focus, emphasizing the application of skills directly to the problem of substance abuse.

On sexual behaviour, parents should parent and teachers should vet the friends and social circles of the students, as the biggest reason adolescents start using drugs is because their friends utilize peer pressure, they should be a media role model to their children. They should be aware of what they are watching and/or playing when their child is present. Know that even if their child may not understand the content, the sexual information may still affect them. For adolescents, many music videos/lyrics, TV shows, video games and magazines contain inappropriate or glamorized sexual images and behaviors that may negatively impact their views on sex, love and relationships. Co viewing/listening can often help lead to discussions about media portrayals of sex and consequences of sexual behavior with children.

Communities can send a clear and consistent message by developing and implementing a broad, comprehensive approach to dealing with substance abuse. Because of the complexity of the problem, co-ordination of prevention messages and activities with other institutions in a student's life

is essential. The community, not the school, is where most students' drug use occurs. Communities can be active in changing and supporting non-use norms and reinforcing messages given at school.

Punishment methods associated with crisis management approaches which are reactive in their policies and locate the problem in students can be used. This relies on the infliction of punishment with the aim of deterring students or adolescent from committing the crime. This method applies the principal of stimulus-response connection. The purpose of punishment should be communicated, understood and accepted if it is to be effective in enforcing student discipline. Obviously, however, drug abusers cannot be rehabilitated through punishment alone.

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