

# Drug Abuse among In-School Adolescents in Nigeria

Agatha Francis ZIRRA

*Department of Science Education, Adamawa State University, Nigeria*

**Abstract:** - The most susceptible and deeply engaged group in the social menace of drug abuse are in school adolescents. However, in the mainstream media, drug abuse among school teenagers has lately dominated debate. In Nigeria, the threat of drug abuse has reached an appalling level and every fibre of culture has been penetrated. Teachers, parents, religious officials and other stakeholders have tried to identify the causes and methods to manage it. This emphasis the need for the vice to be curbed. This article therefore seeks to examine drugs abuse among in-school adolescents and the implications for counselling. It examined a range of topics such as the concept of drug abuse, drug abuse theories, causes of drug abuse among teenagers in schools, drug abuse impacts on school adolescents' learning and investigated methods of preventing or controlling drug abuse. Finally, some recommendations were made that could help curb the threat of drug abuse among in-school adolescents in Nigeria if adopted.

**Keywords:** Drug abuse, in-school adolescents, peer group, cocaine and nicotine.

## I. INTRODUCTION

Adolescence is a time of transition from infancy to adulthood, and several physical, psychological and social modifications mark the critical developmental period. Adolescents are 14 – 25 year age segment of the population. In Nigeria, most learners in schools are generally between 14 and 25 years of age (Olugbenga-Bello; Adebipe; Abodurin, 2009). Teen age is a time of exploration, research, curiosity and a search for identity. This includes some risk-taking, including the use and abuse of psychoactive substances, which are the drugs that have their main impacts on the brain and which cause an individual's mood to sedate, encourage or alter. Adolescents face the enormous job of identity-building. The fresh cognitive abilities of mature teenagers enable them to think about who they are and what makes them special. Identity consists of two parts: one self-concept and the other self-esteem. Self-concept is a collection of views about oneself that include characteristics, roles, objectives, concerns, values, religious beliefs and political beliefs.

All the changes in development that teenagers experience prepare them to try fresh behaviour. This experiment leads to risk taking, which is a standard component of the growth of adolescents (Sue et al, 2009). Engaging in risk management enables teenagers shape their identities, test fresh policy abilities and achieve recognition and respect among their peers (Ponyon, 2009). Some of the risks taken by adolescents may pose true health and well-being threats. Pregnancy, smoking, over consumption of alcohol, and drug abuse are some of these factors. Odejide (2000) suggested that a drug is abused when its use is not

essential, particularly if the drug is used against the law, or if the over-use of a socially acceptable drink. Odejide (2000) Sambo, (2008) believed that the physical and psychological development of adolescents can be severely and occasionally irreversible as a result of the use of chronic drugs.

Human history is also the history of substance abuse (Maithya, 2009). In itself, the use of drugs does not constitute an evil; in fact, some drugs have been a medical blessing. (Maithya, 2009) Herbs, roots and tree leaves have been used since time immemorial for the relief of suffering and disease control since. History says that before the 18th century, opium was used by the Chinese as a dysentery remedy. The exchange of opium development in their colonies for tea and silk with China was recognized in European nations such as Britain and Holland (U.N.,2005). Unfortunately, some drugs that originally have attractive impacts like a sensation of good, elation, serenity and power have evolved into a problem of dependence and abuse. Drug abuse is an internationally significant public health issue (UNODC 2005). Drug use and abuse by teenagers have been one of Nigeria and other regions of the world's most disturbing health associated events (NDLEA 2013).

Mental health is an issue for several school-going adolescents, either temporary or for a long time. Some get crazy, get disadvantaged and ultimately leave the schools. NAFDAC, (2004), as referred to in Haladu (2003), explains the word substance abuse as excessive and continuous drug autonomy, regardless of trends accepted medically or culturally. The use of drug could also be considered in such a way as to interfere with an individual's health and social role. Odejide, (2000) has advised that medical specialists and counsellors should treat substance abusers with symptoms of stress, anxiety, depression, changes of behaviour, exhaustion, and loss or an increase in appetite to save them from lethal illnesses. The alarming proof in the incidence of drug abuse, the impacts and implications of drug abuse among learners has called for all the professions to help to develop policies that equip young people with living abilities that do not abuse substances.

## II. CONCEPT OF DRUG ABUSE

Drugs are substances that alter the normal biological and psychological functioning of the body and in particular the central nervous system when introduced into the organism (Escandon & Galvez, 2006). Generally, the term 'drug' includes all substances that may affect the function of the brain and cause dependency. The UNICEF and World Health Organization (2006) define drug abuse as the self-

administration of all drugs in a way that is different from approved medical or social pattern in a given culture. Legal or licit drugs and substances are accepted socially and are not criminally offended by their use. These include Alcohol and nicotine in Nigeria. However, the use of these legal substances and drugs are usually abused by in-school adolescents. Cannabis, ecstasy, heroin, mandrax and diethylamide lysergic acid are among the illegal drugs also used by in-school adolescents (NAFDAC 2004).

When taken without any medical condition and/or prescription, prescribed drugs are abused. These drugs can include mood lifts, pain killers, or antidepressants. Drugs include codeine-related pain killers, phenobarbitone, valium, piritone and sleep control medicines. A study by Rew (2005) has found that these psychic substances are able to produce surplus energy feelings, euphoria, stimulation, depression, relaxation, hallucinations, temporary wellness and sleepiness. The abuse often leads to physical or physiological dependence.

One of the world's biggest markets, the United States has seen a noticeable recent increase in marijuana use as a country that settles standards for many other countries. This has affected students' decision in other countries regarding the use of drugs. Many American movies and young audience magazines sensationalize the use of drugs. This representation of drugs can be highly misleading, making young people more vulnerable to addiction in countries elsewhere. A NAFDAC (2008) report noted that abuse in Nigeria is a student sub-culture in both licit and illicit drugs. This development is a major concern of Nigerian society and it requires immediate attention. When a medicine is abused, the brain is wounded and often changes to the central nervous systems are irreversible. The effects are deadly when psychoactive drugs are destroying several thousand cells and a proportion of in-school adolescents have died from overdoses of medications.

### III. TYPES OF DRUGS ABUSED BY IN-SCHOOL ADOLESCENTS

Almost any material, the consumption of which may lead to an ("elevated") euphoric sensation can be abused. Many know that there is abuse of legal substances such as alcohol or drugs such as marijuana (in most countries) and cocaine; however, less well-known is the reality that household cleaning inhalants are some of the most frequently abused. Other types of medicines such as Indian hemp, widely used in Nigeria and other countries such as methamphetamine, codeine-free syrups and pills are discovered primarily in army quarters, colleges, car parks and even with local traders selling food supplies at kiosks. Miller (1974) asserted that, that the following are some of the drugs and types of drugs that are commonly abused and/or result in dependence by youth

- i. *Alcohol*: One of the most prevalent dependencies that tend to latch on to the lives of in-school adolescents at a young and lasting throughout most of their lives. alcoholism can have catastrophic impacts on physical

health and the capacity of the alcoholic person to work and have interpersonal relationships. Examples of alcohol include; beer, stout, distilled gin and palm-wine.

- ii. *Cocaine*: this is a drug which stimulates the nervous system. It may be snorted to the powder, smoked, or injected into liquid as rock (crack).
- iii. *Nicotine*: Nicotine is simply one of the most addictive drugs discovered in cigarettes. Indeed, nicotine dependence is often likened to intense opiate addiction like heroin.
- iv. *Phencyclidine*: commonly known as PCP, this medicinal product can make the customer highly paranoid, aggressive and physical power rare. This can render the person very hazardous for others.
- v. *Sedative, hypnotic or anti-fear medicines*: As these substances quilt or depress the nervous system, they may kill the individual who is either overdosing or mixing one or more of them with another depressing nervous system (similar to alcohol, another sedative or opiate).

### IV. THEORIES ON DRUG ABUSE

Drug abuse theories show that some individuals really rely on certain medicines because of a variety of variables to survive them. The main emphasis of the theories is that individuals depend on one medication or another for their personal purposes. The following theories explain these; Personality theory of drug abuse, learning theory of drug abuse, biological theory of drug abuse and socio-cultural theories.

- i. *Personality theory of drug abuse*: The theories primarily emphasize the fact that people who abuse drugs contain certain traits or features. Those features are unable to delay gratification, bad frustration tolerance, bad command of impulses, great dependency on others, bad handling skills and low self-esteem. It is hard to abstain from drug abuse by persons with these features.
- ii. *Learning theory of drug abuse*: it holds that the use of drugs is the consequence of teaching. Theory of drug abuse The teaching could be through training, tools or personal education.
- iii. *Biological theory of drug abuse*: Theory holds that abuse of drugs is defined by the biological or genetic factors which render the individual susceptible to addiction.
- iv. *Socio-cultural Theories of Drug Dependence/Abuse*: The authors say that abuse is determined by people's sociocultural beliefs. Socio-cultural models are theoretical. For example, while some cultures allow alcohol and marijuana to be consumed, other cultures do not. Among the Urhobo, Ijaw, Ibibio, Edo, Igbo, Yoruba and Itsekiri, alcohol i.e. Ogogoro is used in cultural activities. Alcohol is prohibited by Sharia law in Northern Nigeria. The sharia law does not,

however, prohibit consumption of cigarettes and therefore this is evident in the rampant nicotine addiction.

However, the aetiology of drug abuse is not fully explained in any hypothesis. This is because of the distinctions between people. It then becomes obvious that the disorder (drug abuse) is an acquired one. The acquisition then is dependent on a host of personal inclinations and environmental factors, social cognitive theory, i.e the triadic reciprocity involving behavior, environment and the person. The issue of substance abuse is so serious that, while it had initially been conceived as a "single group" problem, it now includes women, young individuals and rural inhabitants beyond the common features of masculine, adult and urban abusers. These abusers mistakenly think that drugs improve their output and mood, the accompany problems of this act constitute a major threat to the well-being of the society (Obiamaka, 2004).

In Nigeria, young people like many other nations are creating dependence on psychoactive drugs. Drug use and abuse information were gathered in 1992 by the National Drug Law Enforcement Agency (NDLEA), registers of clients who were taken to medical facilities for child issues, and interviews of individuals detained for substance crimes. The results demonstrated that young people are the high-risk community for drug trafficking and abuse. Around 90% of the origin of impact on the use and abuse of multiple psychoactive drugs are represented by friends and college friends. Alcohol and cigarette are legal drugs in Nigeria, but the two have been found to harm human organs physically. They have also been referred to as "portal medicines" for other more powerful drugs such as heroin and cocaine (Bandura, 2006). In Nigeria, 90,0 per cent of all pulmonary disease, 30,0 per cent of all cancers and 80,0% of other acute pulmonary illnesses have been revealed to be caused by smoking (tobacco). Such a study as this among in-school adolescents is very necessary to determine the incidence and educational implications of drug abuse among them.

#### V. CAUSES OF DRUG ABUSE AMONG IN-SCHOOL ADOLESCENTS

Teachers and students in various studies have attributed the causes of in-school adolescent drug abuse to peer pressure, social opportunities, private issues and curiosity drug and substance abuse. However, it has been deduced by Haladu (2003) that drug use are instigated by many variables including:

- i. *Curiosity*: Curiosity to experiment with unidentified medication facts motivates teenagers to take medicines. The first experience in the field of drug abuse gives rise to a feeling of excitement, such as gladness and fun.
- ii. *Peergroup influence*: The influence of peer pressure on many adolescents in drug abuse is important. This is because peer pressures are a reality of adolescence

and adolescence. They are more dependent on their buddies as they attempt to rely less on relatives. In Nigeria, one can not appreciate the business of others, like other areas of the globe, unless they meet their standards.

- iii. *Lack of parental guidance*: Many fathers do not have time to monitor their children. Some fathers have little or no communication with household members, while others press for examinations or stronger study by their kids. This initializes drug abuse and improves it.
- iv. *Socio-economic circumstances*: Drugs have been discovered to be abused by in-school adolescents with personalities owing to social circumstances. Most Nigerians have below median social and financial status. Poverty is common, households are shattered and there is increasing unemployment, so our young people walk on the roads to seek jobs or beg. These circumstances are compounded by lack of skills, opportunities for training and re-training and lack of committed action to promote job creation by private and community entrepreneurs. Frustration caused by such issues leads to the use of substance abuse to eliminate the stress and its issues momentarily.
- v. *Drug availability*: Drugs fell in prices in many nations, as there has been a significant increase in supply of such over the last decade.
- vi. *The need to avoid withdrawal symptoms*: If a medicine is halted, the customer will experience what is known as 'retirement symptoms.' Such symptoms are characterized by pain, anxiety, excessive sweat and trembling. The drug user's failure to accept his symptoms leads him to stay (Ige, 2000).
- vii. *Advertising*: young people are quick to copy and advertise. The glamor of alcohol advertising and tobacco create young people want to be the way the ad shows.
- viii. *Social and emotional pathologies*: one of such social pathologies that relates to in-school adolescents is parental deprivation. In-school adolescents may take drugs in order to forget their trouble when they are triggered by emotional pressures, such as anxiety, anger and economic depression.

#### VI. EFFECTS OF DRUG ABUSE AMONG IN-SCHOOL ADOLESCENT ON THEIR EDUCATION

Drug abuse has become a stumbling block to the students learning behavior which is an essential element in education practice (Blandford, 2008). It has been noted generally that school indiscipline is on the rise due to drug abuse and many incidences related to this make the headlines in the daily press. In-school adolescents who persistently abuse substances often experience an array of problems, including academic difficulties, health-related problems, poor peer relationships and involvement with the juvenile justice

system. Additionally, there are consequences for family members, the community, and the entire society like conflict between friends, family breakdown, violence, gangs, drug trafficking etc.

Declining grades, absenteeism from school and other activities, and increased potential for dropping out of school are problems associated with adolescent substance abuse. Hawkins, Calatano and Miler (2002) had research finding that low level of commitment to education and higher truancy rates appear to be related to substance use among adolescents. Again drug abuse affects the brain, this result in major decline in the functions carried out by the brain (Abot, 2005). Drugs affect the students' concentration span, which is drastically reduced and boredom sets in much faster than for non-drug and substance abusers. The student will lose interest in school work including extra curriculum activities. Most of the psychoactive drugs affect the decision-making process of the students, creative thinking and the development of the necessary life and social skills are stunted. They also interfere with the awareness of an individual's unique potential and interest thus affecting their career development (Kikuvi, 2009).

Cognitive and behavioural problems experienced by alcohol-and Drug-using in-school adolescents may interfere with their academic performance and also present obstacles to learning for their classmate (United Nations, 2005). Drug abuse is associated with crime maintenance of an orderly and safe school atmosphere conducive to learning. It leads to destruction of school property and classroom disorder.

Drug and substance abuse have far reaching ramifications, for instance, according to the survey by NAFDAC (2012) with a sample of 632 children, it was found out that 6% have ever engaged in sex while on drugs ( 7.3% for boys and 4.4% for girls). The median age at sexual debut being estimated at 11 years. An assessment of the situation during the first sexual intercourse indicates that 30% had sex unwillingly. Further, about 20% were given incentives to lure them in to sexual act, with a further 8% reporting having taken drugs before their first sexual encounter. This early introduction into illicit sex goes a long way in impacting negatively on their self-esteem, exposing them to dangers of early pregnancy contracting STIS and AIDS, declining academic performance and ultimately dropping out of school altogether (Maithya, 2009).

## VII. PREVENTION AND CONTROL OF DRUG ABUSE AMONG IN-SCHOOL ADOLESCENTS

The impact of drug abuse particularly on in-school adolescents is not understood by most individuals. It is very important to prevent or control drug abuse. Drug abuse is an increasing issue and the prevention of drug abuse should also be an increasing metric in order to excessively strengthen the cancerous gum.

*Family:* Drug abuse avoidance must begin with the family first. Family is one or two relatives, their kids and close relationships. An extended family has a function to perform to prevent drug abuse, whether nuclear or otherwise. Family is the lowest unit in community and the first to stop and regulate the abuse of these medicines. These are the main methods to prevent or control the family's substance abuse; Religious commitment: parents should be devoted to God. Parents and devoted religious individuals should be devoted. You should guide your kids into God and ensure they are engaged in God's ministry.

*Care and Supervision or Surveillance:* Parents should look after, respond to, and supervise or supervise their physical requirements. To ensure they are a healthy business, they should monitor their movements. If you keep a bad company, you should immediately be fixed. They ought not to be over-welcome. Parents should not only teach their kids about the risks of substance violence, they should also create family laws and implement them. They should also develop an efficient surveillance scheme for the operations of their children.

*Appreciation:* The family should be honestly appreciated. Parents should always appreciate their kids when they do things that are worthwhile and also appreciate each other by their parents (Bamaiyi, 2007).

*Family Discussion:* Family discussions should not be neglected by parents, but should take place occasionally. For all employees of the community, this is essential. It contributes to mutual understanding and solving each other's family issue. In family discussion, problems or burdens and ideas are shared. In the family debate, the problem that one may decide to find a remedy to drug abuse in particular from alcohol is resolved.

*Communication:* This is also an significant way in the household to prevent or control drug abuse. The strategy is essential in any scenario. It is a way for parents to speak to their kid who takes drugs and he stops, but there is a way for them to get close, and the scenario will get worse. In interaction and adjustment in the community there should be humility and love.

*School:* This is a location where learners receive official education. School particularly in our tertiary organizations, is the home for drug abuse. The picture of our universities and community as a whole is destroyed. Tertiary institutional drug abuse encourages diseases such as cultism. In avoidance of drug abuse, the school has an significant part to perform. However, in doing this, the following should be put into consideration; teach the students the dangers of drug abuse, Caring and monitoring the students', Organizing lecture/seminar for parents and students on the dangers of drug abuse, Having workshops, conferences and symposia on drug abuse and its effects on students, Counselling centres should be opened to discourage the students from even attempting to give it.

*Community*: this entails a group of people living together in a particular place. In drug abuse prevention, the Community has an important part to perform. Some of these functions include: Sensitization of the risks of drug abuse in the society, alternative supply of drug abuse like leisure, etc., providing opportunities for employment, learning about the risks of drug abuse and how to withstand medication is organized by teaching, seminars, conferences, symposiums and conferences, Community should minimize the rate of alcohol sales and drinking or prohibition of alcohol and drugs, Establishment of organizations to track and punish tobacco traders, drug addicts and alcoholics, create awareness to fight drug abuse in the mass media, Starting campaigns and protests against the use of drugs, counselling centres should be provided.

### VIII. IMPLICATIONS FOR COUNSELLING

Drug abuse in adolescence is one of the deadliest menaces faced by Nigerians today. Adolescents obsession on the consumption of hard drugs leading to drug abuse is an unconventional behaviour that have refused to find acceptance among in-school adolescents.

Counsellors should educate the adolescents in secondary schools and tertiary institutions as an integral part of school curriculum. Drug abusers should be monitored and identified by counsellors and provide counselling therapies for them. Existential therapy should be used on drug addicts which emphasises the uniqueness of the individual and his way of being in the world, to define and actualize himself and establish his values.

The client centred therapy by Carl Rogers can be used by the counsellor on the student with drug addiction so as to become more self-accepting, open to experience and a better integrated person. He can change his faulty assumptions and substitute them with constructive ones.

The use of behaviour therapy can also be applied through systematic desensitization because it specifies the maladaptive behaviour to be modified and the adaptive behaviour to be achieved as well as the specific learning principle to be utilized.

### IX. CONCLUSION

Drug abuse is a disease with an auto-destructive habit of using a drug that causes considerable trouble and issues. Looking at data collected from different literatures, it can be noted that drug abuse is not induced by only one factors, as many authors have stated. At least two or more variables interact with one another. Not only does drug abuse become a universal, cultural and mental issue, it has also appeared that drug abuse patterns have almost totally altered and have taken on a dimensional pattern of behavior, including drug use (abuse) sales and usage (cannabis, vellum, vanillin syrup and tremolos), carried out publicly in all countries, including settlements during electricity Uncontrolled use of drugs also entails violence, crime,

misconduct and therefore a general danger to community. Drug abuse is harmful to the user's health and therefore has significant negative impacts on the education of in-school adolescents.

### X. RECOMMENDATIONS

- ❖ Nigeria's government needs to play a major part in preventing abuses of drugs through the National Drug Law Enforcement Agency (NDLEA) and other child monitoring organizations, such as the NAFDAC.
- ❖ In addition, a well-defined and thorough, realistic drug control strategy should be adopted by the Government. This policy should include setting up a federal drug monitoring centre, which will collect data about the drug use and liaise with comparable narrower facilities that will be established in every country under the aegis of the Ministries of Health and Internal Affairs.
- ❖ Public education should focus on fragile segments of our society, including adolescents and young adults. Such educational measures should be carefully presented through methods that avoid threats and dramatization. By means of open campaign meetings, Mosque and Churches inclusive, in government locations such as car parks, secondary and primary schools and other educational organizations. Because these are areas where teenagers are highly concentrated; the secondary school curriculum should be directed towards fighting against drug abuse.
- ❖ Finally, any realistic effort to tackle drug abuse must be sufficiently multidisciplinary. Any law intended to regulate conduct, must include suggestion from the country's appropriate professional bodies such as psychologists, psychiatrists, sociologists, young people, and welfare officers, counsellors, educationists, public health ministry representatives and law enforcement agents.

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