

Undergraduates' Exposure to and Knowledge of Information on Dangers Drug Abuse in South East, Nigeria

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Abstract:- This study was a survey research carried out to find the extent of university students' exposure to and knowledge of information on dangers of drug abuse. The study adopted the Social Control Theory, Differential Association Theory and Public Health Model and Environmental Approach. The area of study was Southeast, Nigeria and the sample size was 400 from undergraduates of three universities in the region. The researchers discovered that most of the respondents were exposed to and have knowledge of dangers of drug abuse, but the national agency in charge of drug information, education and eradication in the country were the least in information dissemination to the tertiary students. They concluded that undergraduates of universities in South East Nigeria were knowledgeable about drug abuse and were exposed to drug abuse information although variance was noticed in effecting received knowledge to behaviour. The researchers, therefore, recommended that relevant health organizations should be empowered to carry out free and accessible educational resources to increase awareness on types of drugs and the dangers of drug abuse.

Keywords:- Undergraduates, Knowledge, Exposure, Information, Drug Abuse.

I. INTRODUCTION

Students at this stage of their lives experience so much freedom in making personal choices that may become detrimental to them later in life. However, drug abuse is a deliberate use of drug which alters the functioning of the body and mind and affects the dimension of health. According to Ani (2014), the harmful use of illegal drugs and the consumption of other psychoactive substances such as; cannabis, cocaine, alcohol, pharmaceutical drugs, inhalants and solvents in Nigeria have increased at an alarming rate over the years. Recent studies have identified the abusive use of illicit drugs by Undergraduates in Nigeria especially cough syrup to be escalating (Pulse, 2018; United Nations Office on Drugs and Crime (UNODC), 2019). Thus, Adlaf, Begin and Sawka (2005) affirmed that youths are likely to engage in risky alcohol and drug use and they also disproportionately experience greater harm from their use. Research has shown that over 40% of Nigerian youths engage in abuse of drug (Nini, 2017). And a high proportion of this abuse is

among students (Eneh and Stanley, 2004). Miller (2019) observed that the chronic use of tolerance producing drugs increases the risky behaviour of the abuser, the risk of drug abuse as well as the likelihood of impaired psychological damage to the body. World Health Organization (2011) discovered that globally, 320 000 young people aged 15-29 years die annually (the age bracket usually found in universities) from drug-related causes.

In Nigeria today, more youths are becoming drug dependents. According to United Nation Office on Drug and Crime UNODC (2018), West and Central Africa face destabilizing new trends on drug abuse, drug trafficking and other drug related crimes been perpetrated by youths in the country. However, a publication by National Bureau of Statistics (NBS) as quoted by Enejo (2019) held that drug abuse prevalence in Nigeria is estimated at 14.4 percent or 14.3 million people aged between 15 years and 64 years, as Nigeria is gradually becoming a drug-producing country. Staff (2012) offered that drugs such as marijuana, methamphetamine and codeine which intoxicate are mostly found in schools. National Drug Law Enforcement Agency (NDLEA) report of 2010 showed 29% of youths abuse drugs, with undergraduates using cough syrups to make themselves high.

According to Martin, Christopher, Ademola and Emmanuel (2018), drugs such as codeine and tramadol are challenges that threaten the future of Nigeria undergraduates. Daily, over 5 million codeine content holders are consumed by youths in Nigeria, same with consumption of tramadol, rohypnol, marijuana, and opioids. Drug abuse is the underlining factor in the rising cases of cultism, violence and mental disorder among youths. The situation in Nigeria's tertiary institutions shows there is a disturbing increase of drug abuse in the country. Governments, organizations, institutions and individuals in Nigeria have continued to adopt many preventive measures such as control-policy to limit the availability of substance and sensitization programmes to discourage drug abuse. These steps are geared towards reducing or probably to eliminate drug abuse by university students in the country, yet drug abuse prevalence within the students is still high. This study was therefore carried out to ascertain how informed undergraduate students in South-east, Nigeria are on these issues enumerated.

A. Statement of the Research Problem

University students' abuse of drugs in Nigeria is now a common occurrence. A substantial proportion of them use drug to the extent that their health, interpersonal relationships and academic performance are adversely affected. The abuse cuts across all sexes and status. While males had a higher proclivity to abuse drugs, the number of females abusing drugs was on the rise among youths in various institution of learning (Essien, 2010). A recent research in Nigeria by United Nations Office on Drugs and Crime (UNODC) (2019) showed that drug abuse in Nigeria is higher in men than women by seven times with past year prevalence estimated at 18.8 percent among men as compared to 2.6 percent among women. The research further revealed that the level of drug use in Nigeria is comparable to the prevalence estimates of drug use in West and Central Africa's 13.2 percent rise in young people's consumption of drug (UNODC, 2019). So many university students are school drop-outs because of their involvement in drug use. Many of them have become homeless, wanderers, derelicts, unemployed, rapists, thugs and armed robbers (UNODC, 2018).

However, control policies, information and education to discourage drug abusers were instituted by government, organizations, institutions, even individuals to help curb this menace or even reduce to the barest minimum, yet drug abuse is still on the rise among undergraduates. Thus, this study became relevant to assess undergraduates' exposure to and knowledge of information on dangers of drug abuse.

B. Objectives of the Study

The aim of the study was to study undergraduates' exposure and knowledge regarding information on dangers of drug abuse. More precisely, the research focused on the following objectives:

- To determine if undergraduates are exposed to information on dangers of drug abuse.
- To ascertain undergraduates' sources of information on drug abuse.
- To determine their knowledge of dangers of drug abuse.
- 4. To ascertain whether the information they received on dangers of drug abuse influences their behavioral pattern.

C. Research Questions

From the foregoing objectives, the researchers formulated the following research questions to guide the study;

- Are university students exposed to information on dangers of drug abuse?
- What are their sources of information on dangers of drug abuse?
- What is their knowledge of dangers of drug abuse?

- Does the information they received on dangers of drug abuse influence their behavioural pattern?

II. REVIEW OF RELATED LITERATURE

➤ Overview of Undergraduates' Abuse of Drugs

Adekeye (2012) submits that university students in Nigeria experiment with drugs without knowing which drug to take, when to take it and how to take it. At that stage in their lives, university students experiment to find anything new. They would rather explore by themselves to discover new things than rely on information handed over to them by people. This makes them most times vulnerable to the temptation to try out drugs especially psychoactive drugs. According to WHO (2004), these psychoactive substances are chemical substances that have the ability to change an individual's consciousness, mood or thinking processes when taken. Continuous and excessive use of psychoactive drugs have been linked to poor academic performance and school drop-out (Ukwayi, Ambekeh, Uwanede & Undelikwo, 2013). According to Castillo and Schwartz (2013), 91 percent of campus counselling directors reported a trend toward a greater number of students with severe psychological problems of which most of the services these students seek focus on issues from drug use, including effects of abuse on health and social behaviour. They have been found to exhibit more clinically significant drug-related problems (Kypri, Cronin and Wright, 2005).

According to Zhimin, Weihua, Zhi, Mu, Cai and Cao (2001), the rate at which young people at universities abuse drugs increases due to the peer-group influence; desire to remain awake at night, pressure to succeed in academic work, self-reported poor mental health and easy accessibility of drugs. Balogun (2006) believes that drug is considered as a substance that alters perceptions, cognitions, mood behaviour and general body functions. Some university students use drugs such as caffeine or nicotine because they are legal. Studies have reported a connection between drug use and missing of class, impaired academic achievement, unsafe sex (Newbury-Birch, White and Kamali, 2000) and violence among university students. Drugs abused range from the socially accepted ones like tobacco, Miraa and caffeine to the illicit such as heroin, cocaine and cannabis. Student abusers usually begin as what Nacada (2005) called glue sniffing street children and teenage ecstasy users to hard core heroin and cocaine addicts often leading to downward spiral of hopelessness that in most cases end fatal. Thus, reducing drug abuse among university students remains a critical national priority (Healthy People, 2010). Therefore, it is necessary to examine their exposure to and knowledge of information on drug abuse to ascertain if they know the consequences of such abuse to themselves and the general society.

➤ *University Students' Exposure to and Knowledge of Information on Dangers of Drug Use*

Horgan & Sweeney (2010) discovered that youths go through difficulties before getting health services, especially with the stigma of some health conditions like madness, unwanted pregnancy and Human Immune Deficiency Virus/Acquired Immune Deficiency Syndrome (HIV/AIDS). This can be solved by using the media to disseminate proper information on these health problems. Usually when young people try to gain access to health information, it because they are trying to resolve their health challenges or problems. They can obtain health information from media outlets such as TV, newspapers, magazines, radio, video, electronic readers and the Internet (Horgan & Sweeney, 2010). According to Gann (1986), this set of information ranges from information about the human body, health information and treatment options. Adeyoyin & Oyewusi (2015) believed that health information messages are given to the young people from departments of health, media health promotion, family planning clinics, pharmaceutical companies, doctors, school nurses, social workers, friends, peer groups and youth organizations through magazines, newspapers, television, e-book, e-readers and Internet.

Sai (2005) emphasized that information on health to young people are often times inaccurate and do not provide enough information to affect their decision making and reducing maternal and reversing the spread of HIV/AIDS. Health information outlets provide information to young people about health and general well-being. Information formats that can be utilized for health information include oral or verbal, audio, visual, print or written and multimedia (Njongmeta & Ehikhamenor, 1998; Mabawonku, 1998; Bii & Otike, 2003; Ojedokun, 2007). Some epidemiological studies (O'Malley & Johnston, 2002; Humensky, 2010; Osman, Victor, Abdulmoniem, Mohammed, Abdalla, Ahmed, Ali & Mohammed, 2016; Bahorik, Satre & Kline-Simon, 2017) have been carried out to determine the rate of drug use among undergraduates in different countries or the consequences inherent, but only little considered the availability of information to these students on drug abuse and their knowledge and exposure to the dangers. O'Malley & Johnston (2002) discovered that lack of knowledge on the risks of substance use has contributed to the increasing cases of substance use disorders and substance use has been attributed to lack of proper knowledge on the associated risks. The internet influences students into drug abuse as well as their peers, thus questioning the credibility and reliability of the source(s) of information to them on drug abuse. Authenticated information on drug use should come from health practitioners.

A related study by Njoroge (2017) in nine universities across the continents reported that university students admit they use and abuse of drug, but did not register their knowledge to the information on the dangers of these substances or an availability of such to them. Meanwhile, Oshikoya and Alli (2006) discovered that the awareness, knowledge, practices and attitudes of Nigerian

undergraduates towards drug abuse is low. Six hundred and ninety-eight (86.5%) claimed they were aware of drug abuse, but their exposure and knowledge of drug abuse is low. They could not identify the factors that necessitate drug use and the likely risks. Two hundred and sixty-six (33.0%) students were currently taking one or more drugs of abuse. Coffee (43.1%) was the most commonly used drug, followed by alcohol (25.8%) and marijuana (7.4%). The study also revealed the poor attitudes of the undergraduates to drug addicts even after rehabilitation (Oshikoya and Alli, 2006). Therefore, there is need for reliable and readily available sources of information to these students.

➤ *Empirical Studies*

Research had been undertaken concerning undergraduates and abuse of drugs round the globe and specifically. Adeyemo, Ohaeri, Okpala & Ogodu (2016) sought to determine the rate of abuse of drugs by students in one university in Benin City, Edo State, Nigeria. The study adopted a descriptive survey design. The sample size for this study was 800 students (n=800) and structured questionnaire was used to collect data. These researchers discovered that majority of the respondents were young people within the age group of 20-25 years with higher number of respondents as male students. The study revealed that 46.6% of the sample respondents took drugs for non-medical purposes at least once. Majority of the respondents agreed that students also took drugs as a result of poor teacher-student relationship, improper parental upbringing, as well as the influence of peer pressure (Adeyemo, Ohaeri, Okpala & Ogodu, 2016).

Adenike, Surukat, Adegboyega & Sennuga (2014) studied youths' academic performance and development in Nigeria to ascertain youth behavior and their vulnerability to drug abuse menace in Nigeria. The study employed primary source of data. The study population consisted of secondary school students, university undergraduates, youths in the community, management and staff of schools in Ijebu-North local government area. The researchers found out that a significant relationship existed between drug abuse on youth development and academic performance (failure) with about 93.56% (842) of respondents in affirmation. They concluded that there is relationship between drug abuse on low contribution from youths to development and their performances in schools. They advised that proper sensitization on the consequences of drug abuse should be done in line with effective counselling programme to reduce the problems.

Essien (2010) focused on the use of drug and its abuse in higher institutions and reasons why students abuse drugs in Federal University of Technology, Minna students. It studied the level of drug use by students. The study employed survey method adopting the questionnaire to ascertain students' views on the use of drugs and the abuse. The sample size consisted of 100 males and 100 female students. The research findings revealed that certain pre-disposing factors such as sex, age, family background,

occupation of parent etc. contributed immensely to drug abuse by the students (Essien, 2010).

From the foregoing that a good number of students try out drugs on their own, it therefore becomes a cause to worry on whether they know the risks associated in doing so. Only few studies have studied undergraduates' knowledge of consequences of drug abuse and the researchers could not find any on their exposure and knowledge to information on dangers drug abuse. As discovered also, there are a handful of studies on drug abuse in Nigeria but very few were conducted in the Southeast.

III. THEORETICAL FRAMEWORK

➤ *Social Control Theory*

The social control theory sees drug use and abuse among students in the light of four fundamental components of attachment, commitment, involvement and belief system. This theory was propounded by Hirschi in 1969. Hirschi's (1969) social control theory has been used on deviant behaviours, such as delinquent acts (theft, vandalism) and drug use and addiction, rather than deviant roles and identities. The theory assumes that people would break the law or go contrary to the norms unless they are actively prevented from doing so. The best means of such prevention is effective socialization from childhood to adulthood. Hirschi (1969) argued that close associations with parents and siblings, law-abiding peers, and teachers or other school officials go a long way in controlling individuals' behaviour.

In the same vein, Braithwaite (1988) submitted that the concept that people are uncontrollable and may offend against those norms in social interactions, cannot be explained by simply counting how many people practice the golden rule. In addition, Gibbons (1994) questioned the notions of self-control as proposed by Hirschi as per whether it can be used to explain more serious offending behaviour. Other critics of the theory contended that the theory may be better able to explain minor offending, but does not necessarily adequately account for more serious crime (Gibbons, 1994). However, any social control system for students will be dependent on different exposures of the students to other students. On this basis, a second theory was adopted, the Differential Association theory. This theory offers a balance that a system can be controlled to limit flow of drug use and abuse, different association with drug users may affect the system.

➤ *Differential Association Theory*

This theory was propounded by Sutherland in 1939. The theory as quoted by Igbo (2017) posits that criminal behaviour is learned when people interact or communicate within closely knitted groups. Sutherland (1939) gave a good example using two boys who engaged in a minor theft and who ran away when they were discovered. One of them with longer legs escaped and later became a priest, while the one with shorter legs was caught, sent to a reformatory and later, became a gangster. Sutherland emphasized that

the "length of legs" of the boys was not the cause for either the criminality or priesthood. What was important was the subsequent association of the boys, one with the seminary and the other with the criminal.

The theory is relevant to the study because it is of the view that some certain actions are learned through interaction. University environment offers such a limitless platform where someone is free to interact and associate with any sort of person he/she deemed fit. If an individual happened to be a drug abuser, he/she may likely imitate and learn the conduct of his friends who are drug abusers. In as much as drug abuse is a crime and as well an act of defiance, a law-abiding undergraduate would eventually commit the crime of abusing drugs when such an undergraduate associates more and constantly with his counterparts who abuse drugs than with his colleagues in the campus who are not drug abusers.

➤ *The Public Health Model and Environmental Approach*

This model believes that individual actions are a result of interactions among the environment (physical and social context), the person (host), and the agent (substance). National Institute on Drug Abuse (NIDA) (1997) offered that prevention initiatives that focus on the agent are seen as supply reduction strategies; initiatives that attempt to alter an individual's demand are seen as demand reduction strategies, while initiatives that focus on the surrounding of the substance abuser are considered as environmental approach. By changing the environment where the person lives, it can shape the individual's behaviour, and such an environmental approach can be used for both supply and demand reduction. This model stresses on intervention at three levels, namely universal, selected and indicated for different stage and phases of drug abusers (NIDA, 1997). For students in the universities under study, the different stages and phases of drug abusers can be adopted. The agencies in charge in the country, like NDLEA, can undertake such campaigns and exercises. Though it may be difficult in Nigerian universities to have students who will admit that their parents were/are abusers, such agencies may start with those who show signs of abuse or may conduct universal preventive campaigns for all.

IV. METHODOLOGY

➤ *Research Design*

The design for this study was survey. The population is given at 294,356 according to data sourced from the websites of Nigeria Universities. Sample size was derived from three universities, namely, Nnamdi Azikiwe University, Enugu State University of Science and Technology and Rhema University, Aba. The sample size was 400, this was determined using Taro Yamane's formula. The sample procedure was multi-stage technique which involved following a series of logical steps in selecting sample units.

V. DATA COLLECTION ANALYSIS

➤ *Respondents' Exposure to Drug Abuse Information*

| | Frequency | Percent |
|--------------|------------------|----------------|
| Yes | 379 | 97.9% |
| No | 8 | 2.1% |
| Total | 387 | 100% |

Table 1

This indicated that 97.9% of the respondents were exposed to drug abuse information as against 2.1% that were not. This shows that almost all the respondents studied were exposed to drug abuse information. The question put to the respondents in the questionnaire was "Have you been exposed to drug abuse information?" meaning that respondents who answered yes were those that actually read or listen to drug abuse information. Therefore, almost all the respondents could be said to be active readers of or listeners to drug abuse information.

➤ *Respondents' Paying of Attention to Drug Abuse Information they were exposed to*

| | Frequency | Percent |
|--------------|------------------|----------------|
| Always | 105 | 27.1% |
| Sometimes | 181 | 46.8% |
| Rarely | 81 | 20.9% |
| No Answer | 20 | 5.2% |
| Total | 387 | 100% |

Table 2

This indicated that 105 respondents representing 27.1% always paid attention to drug abuse information, 181 respondents representing 46.8% sometimes paid attention, 81 respondents representing 20.9% rarely paid attention, while 20 respondents representing 5.2% gave no answer.

➤ *Respondents' Knowledge of Drug Abuse*

| | Frequency | Percent |
|--------------------------|------------------|----------------|
| Irregular intake of drug | 33 | 8.5% |
| Wrong dosage of drug | 43 | 11.1% |
| Intake of harmful drug | 65 | 16.8% |
| All of the above | 246 | 63.6% |
| None of the above | 0 | 0% |
| Others | 0 | 0% |
| Total | 387 | 100% |

Table 4

This showed that 33 respondents representing 8.5% knew drug abuse to be an irregular intake of drug, 43 respondents representing 11.1% knew drug abuse to be a wrong dosage of drug, 65 respondents representing 16.8%

This shows that majority (73.9%) always or sometimes paid attention to drug abuse information, suggesting that there was high tendency for the respondents to pay attention to drug abuse information as against passively hearing such.

➤ *Respondents' Sources of Information on Dangers of Drug Abuse*

| | Frequency | Percent |
|-----------------------------|------------------|----------------|
| Radio | 71 | 18.3% |
| Television | 54 | 14% |
| Newspaper | 74 | 19.1% |
| Magazine | 26 | 6.7% |
| Drug Agencies | 5 | 1.3% |
| Interpersonal communication | 46 | 11.9% |
| Internet | 42 | 10.9% |
| All of the Above | 69 | 17.8% |
| Total | 387 | 100% |

Table 3

This showed that 71 respondents representing 18.3% got their information on drug abuse from radio, 54 respondents representing 14% got theirs from television, 74 respondents representing 19.1% got theirs from the newspaper, 26 respondents representing 6.7% got theirs from the magazine, 5 respondents representing 1.3% got theirs through drug agencies, 46 respondents representing 11.9% got theirs through interpersonal communication, 42 respondents representing 10.9% got theirs from the Internet, while 69 respondents representing 17.8% got their information from all the above mentioned sources. This implies that more than half of the respondents (225) got their information on drug abuse from the mass media. Only 5 respondents got from drug agencies.

knew drug abuse to be an intake of harmful of drug, 246 respondents representing 63.6% knew drug abuse to be all of the above mentioned options. This implies that the respondents have knowledge of what drug abuse is.

➤ *Respondents' Knowledge of the Effects of Drug Abuse*

| | Frequency | Percent |
|--------------------------|------------------|----------------|
| Mental Deterioration | 51 | 13.2% |
| School Dropout | 48 | 12.4% |
| Death | 72 | 18.6% |
| Low Academic Performance | 71 | 18.3% |
| All of the Above | 138 | 35.7% |
| None of the Above | 0 | 0% |
| Others | 7 | 1.8% |
| Total | 387 | 100% |

Table 5

This indicated that 51 respondents representing 13.2% knew the effects to be mental deterioration, 48 respondents representing 12.4% knew the effects to be school dropout, 72 respondents representing 18.6% knew the effects to be death, 71 respondents representing 18.3% knew the effects to be low academic performance, 138 respondents

representing 35.7% agreed to all the above mentioned options as the effects of drug abuse, none of the respondents disagreed with the options while 7 respondents representing 1.8% knew other effects not mentioned. The implication is that a high percentage (98.2%) of the respondents knew the effects of drug abuse.

➤ *Effect of Drug Abuse Information on the Respondents Behavioural Pattern*

| | Frequency | Percent |
|--------------|------------------|----------------|
| Positively | 149 | 38.5% |
| Negatively | 9 | 2.3% |
| Not Certain | 229 | 59.2% |
| Total | 100 | 100% |

Table 6

This showed that 149 respondents representing 38.5% said that drug abuse information they got positively affect behavioural pattern, 9 respondents representing 2.3% said the drug abuse information negatively affect behavioural pattern, while 229 respondents representing 59.2% were not certain of the effect drug abuse information has on behavioural pattern. The implication of this is that the respondents who could attest that drug abuse information

affect behavioural pattern positively are less than half of the total number, because a good number of the respondents (229) were uncertain of the effect. The above responses indicate that much number of the students was not fully informed of negative effects of drug abuse on behavioural pattern. This shows that much work is still needed to be in the area of educating students on effect of drug abuse on behavioural pattern.

➤ *Respondents Behaviour when Sick*

| | Frequency | Percent |
|---------------------------------------|------------------|----------------|
| Go to Laboratory for test | 34 | 8.8% |
| Go to Chemist Shop to buy Drug | 184 | 47.5% |
| Visit Hospital | 23 | 5.9% |
| Call a Friend/Family for Drug to take | 51 | 13.2% |
| All of the above | 81 | 20.9% |
| None of the above | 0 | 0% |
| Others | 14 | 3.7% |
| Total | 387 | 100% |

Table 7

This showed that 34 respondents representing 8.8% would go to laboratory for test when sick, 184 respondents representing 47.5% would go to chemist shop to buy drug when sick, 23 respondents representing 5.9% would visit hospital when sick, 51 respondents representing 13.2% would call a friend/family for drug to take, 81 respondents representing 20.9% said they would do the above

mentioned option when they get sick, none of the respondents disagreed with the above mentioned options, while 14 respondents representing 3.7% would do other things not mentioned in the options when they get sick. This implies that only 57 respondents could be said to go through the right source when sick, 235 respondents would resort to personal/family/friend judgement when sick.

VI. DISCUSSION OF FINDINGS

This study indicated that undergraduates in Nnamdi Azikiwe University, Enugu State University and Rhema University knew about drug abuse and were exposed to drug abuse information. The results in this study may be considered as representative of undergraduates in Southeast, Nigeria. The university setting can serve as a veritable ground for students to be lured to drug and its continued use. The respondents in this study knew that drug abuse can cause mental deterioration, school dropout, death and low academic performance, in contrast to Oshodi, Ainal and Onajole (2010) wherein about three-quarters of the respondents (73.0%) were ignorant of the adverse consequences of substance use. The respondents in this study knew what drug abuse is, either as irregular intake of drug or wrong dosage of drug or intake of harmful drug, they correctly answered the dangers of drug abuse and more than half of the respondents also knew that abusing legal and illegal drugs can cause any of the dangers of drug abuse, therefore, it could be said that these university students were knowledgeable about drug abuse. This agreed with the study by Masibo, Mndeme and Nsimba (2013) in Tanzania that discovered that most of the participants knew the definition and types of psychoactive substances around them and majority 99.3% had showed to have adequate knowledge on psychoactive substances and as well, ninety-eight percent of the participants were knowledgeable on the effects of psychoactive substances.

In finding out if the knowledge of the students about drug abuse and its effects and if their exposure to drug abuse information affect their behavioural pattern, the researcher discovered that 149 respondents affirmed that the drug abuse information they received affected them positively amongst other positive actions like reading drug leaflets before medication or taking drugs as prescribed by the doctor. Thus, the drug information available to these students affected their behavioural pattern. This result, however, differed from the findings of Imam (2004) in Kogi state in North Central geopolitical zone where 64.1% of the respondents that were aware of the side effects of the drugs and still engaged in drug abuse.

VII. CONCLUSION

Thus, the researchers concluded that university students in Southeast Nigeria are knowledgeable about drug abuse and are exposed to drug abuse information. Their knowledge and exposure made their behavioural pattern toward drug abuse to be favourable. However, the Nigeria Drug Law Enforcement Agency (NDLEA) was recorded the least in dissemination of drug information in the universities studied. Therefore, their drug abuse school-based preventive strategies or campaigns need to be improved on to include a good number of students.

RECOMMENDATIONS

- Health organizations in the country should ensure free and accessible health information on drug types and dangers of drug abuse.
- Protective/preventive health promotion measures as well as harm reduction programmes would possibly have positive effects on addiction.

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