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Attitude of Commercial Drivers to Drug Abuse: A Case Study of Commercial Drivers in Osun State Nigeria

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Abstract:

The study examined the attitude of commercial drivers in Osun state to drug use, two hundred participants were selected for the study and data was obtained from them using a self-designed instrument which has a reliability coefficient of 0.78. The socio cultural theory of substance abuse was used as the theoretical framework for the study and relevant literature were discussed the data generated from the data were analyzed by frequency and percentage frequency of respondents to the items on each of the items on the questionnaires. Result showed that 90% of respondents are into some form of drug use, 60% of respondents got the habit from peers and 40% got it from parents, result further showed that 60 % use substance because of the nature of their job, while 25% use it because of the want to face situation where they cannot face ordinarily. Study recommended that government should provide more jobs, build stronger institutions and enact stronger law to tackle drug abuse. While the study recommend that parents should watch their children more closely.

Keywords: Drug use, drug addiction, attitude towards drug use

1. Introduction

A recent BBC report on the misuse of codeine cough syrup as a psychoactive drug in Nigeria really exposed the level of substance abuse in Nigeria. The menace of substance use among youths in Nigeria is now at an alarming rate. Although cough syrup with codeine has since been banned by the Federal Government of Nigeria, but there are substances that have the same effect like codeine, which cannot be technically banned in Nigeria. Substance like Lizard excrete, Mentholated spirit mixed in coca cola, ten days urine among others are all substance abused in Nigeria(Ndlea, 2017), but technically they cannot be banned. All these facts points to the ugly fact that Nigeria is gradually losing part of his productive population to substance abuse. This further buttress the suggestion of Ndlea, 1997, when is asserted that the use and abuse of drugs by adolescents have become one of the most disturbing health related phenomena in Nigeria and other parts of the world (NDLEA; 1997), Drug abuse is a major public health problem all over the world (UNODC, 2005) 1997). Several school going adolescents experience mental health programme, either temporarily or for a long period of time. Some become insane, maladjusted to school situations and eventually drop out of school (Fareo, 2012)

In December 2017, the Nigeria drug law enforcement agency destroyed more than 10 metric tonnes of drugs, including cannabis, cocaine and methamphetamine, with an estimated street value of some \$1.4 million (1.02 million euros).in Kano state alone (Naija.com, retrieved on 22nd May 2018)

According to Fawa (2003), "Drug is defined as any substance, which is used for treatment or prevention of a disease in man and animals. Drug alters the body functions either positively or otherwise depending on the body composition of the user, the type of drug used, the amount used and whether used singly or with other drugs at the same time".

NAFDAC (2000) as cited by Haladu (2003) explained the term drug abuse as excessive and persistent selfadministration of a drug without regard to the medically or culturally accepted patterns. It could also be viewed as the use of a drug to the extent that it interferes with the health and social function of an individual. World Book Encyclopedia (2004) defined drug abuse as the non-medical use of a drug that interferes with a healthy and productive life Manbe (2008) defined drug abuse as the excessive, maladaptive or addictive use of drugs for non-medical purpose.

Abdulahi (2009) viewed drug abuse as the use of drugs to the extent that interferes with the health and social function of an individual. In essence, drug abuse may be defined as the arbitrary overdependence or mis-use of one particular drug with or without a prior medical diagnosis from qualified health practitioners. It can also be viewed as the unlawful overdose in the use of drug(s).

Odejide (2000) warned that drug abusers who exhibit symptoms of stress, anxiety, depression, behaviour changes fatigue and loss or increase in appetite should be treated by medical experts and counsellors to save them from deadly diseases.

The menace of drug abuse is mostly more popular among commercial drivers in Nigeria, virtually every motor/park has several kiosk/ shops where alcohol, cannabis are being sold freely without any form of restriction. Therefore the main crux of the study will be to examine the attitude of commercial drivers to drug/ substance abuse, with drivers in Osun state Nigeria as a case study.

2. Objectives of the Study

The general objective of the study will be to examine the general attitude of commercial drivers to drug use, the other objective of the study will be to

- To investigate if substance abuse exist among drivers
- To identify the drug being abused
- To examine environmental and peer influence in drug use.
- To examine the effect of substance abused on the drivers

3. Justification

The study decided to use drivers because data released by the Federal Road Safety attest to the fact that the substance abuse among commercial drivers is now at an alarming rate hence the need to conduct more study in order to find a lasting solution to the epidemic.

3.1. Theoretical Framework and Literature Review

3.1.1. The Socio-Cultural Theory of Substance Abuse

A number of socio-cultural theorists propose that people are most likely to develop patterns of substance dependence when they live under stressful socio-economic conditions. In fact, studies have found that region with higher levels of unemployment have higher rates of alcoholism. Similarly, lower economic classes have substance abuse rates that are higher than those of the other classes (Franklin& Markarian, 2005, Khan, Murray & Barnes, 2002)

Other socio-cultural theorist proposes that substance abuse dependence is more likely to appear in families and social environment where substance use is valued or at least accepted. Researchers have I fact found that problem dinking is more common among teenagers , whose parents and peer drinks as well as among teenagers whose family environment are stressful and unsupportive (Legrand at al 2005: Lieb et al 2002, Wills et al 1996)

3.1.2. Literature Review

Studies have attempted to examine the cause of drug abuse in Nigeria, Haladu (2003) gave the following as the main causes'

- Experimental Curiosity: Curiosity to experiment the unknown facts about drugs thus motivates adolescents into drug use. The first experience in drug abuse produces a state of arousal such as happiness and pleasure which in turn motivate them to continue.
- Peer Group Influence: Peer pressure plays a major role in influencing many adolescents into drug abuse. This is because peer pressure is a fact of teenage and youth life. As they try to depend less on parents, they show more dependency on their friends. In Nigeria, as other parts of the world, one may not enjoy the company of others unless he conforms to their norms.
- Lack of parental supervision: Many parents have no time to supervise their sons and daughters. Some parents have little or no interaction with family members, while others put pressure on their children to pass exams or perform better in their studies. These phenomena initialize and increases drug abuse.
- Personality Problems due to socio-Economic Conditions: Adolescents with personality problems arising from social conditions have been found to abuse drugs. The social and economic status of most Nigerians is below average. Poverty is widespread, broken homes and unemployment is on the increase, therefore our youths roam the streets looking for employment or resort to begging. These situations have been aggravated 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 arising from these problems lead to recourse in drug abuse for temporarily removing the tension and problems arising from it.
- The Need for Energy to Work for Long Hours: The increasing economic deterioration that leads to poverty and disempowerment of the people has driven many parents to send their children out in search of a means of earning

something for contribution to family income. These children engage in hawking, bus conducting, head loading, scavenging, serving in food canteens etc and are prone to drug taking so as to gain more energy to work for long hours.

- Availability of the Drugs: In many countries, drugs have dropped in prices as supplies have increased.
- The Need to prevent the Occurrence of Withdrawal symptoms: If a drug is stopped, the user experiences what is termed "withdrawal symptoms". Pain, anxiety, excessive sweating and shaking characterize such symptoms. The inability of the drug user to tolerate the symptoms motivates him to continue (Ige, 2000)

Economic and social factors are also associated with drug use. The availability of drugs in the neighborhood, social norms, and low socio-economic status (SES) increase the likelihood of use (Degenhardt & Hall, 2012). In addition to the main effects of economic and psychological factors, the two may interact to amplify or ameliorate risk. For example, personality traits may be one coping resource to buffer against a poor economic situation. Personality traits could also be a vulnerability that exacerbates risks faced in the community.

Bloom (1986) asserted that alcohol and tobacco are two substances widely used and socially acceptable, though carrying serious hazard to health, and evidence showed that cigarette smoking is responsible for great increase in lung cancer Udoh & Ajala (1986) states that despite alcohol abuse, it has been accepted as a social beverage by many societies all over the world, and it act on the central nervous system (frontal lobe) and also alter the chemical component of the body as well Ackner (1978) asserted that persons who abuse substance do have difficulty in giving up to substance which he takes for the feeling of well being. When substance is abuse it require larger quantity to produce the necessary effect and such person physical health and personality show progressive deterioration

Jaiyeoba (1993) opined that those given to substance abuse especially drug, usually do so for affluence, bad company and unemployment or it might be due to material deprivation which may be as a result of war, divorce or role conflict. Mitchell (1986) asserted that personality disorder can cause substance abuse because when the immature strive to cope with life stresses and strains are well established

4. Method

A survey research design was used in this research for the purpose of finding out responses from commercial drivers in Oke Fia Area of Osogbo, Osun State.

Population of the Study

From the survey carried out by the researcher, the motor park in Oke Fia area of Osogbo have about 150 active drivers and about 50 staff that see to the smooth running of the park.

Sample and Sampling Procedure

A sample is a subgroup of the target population used in a study for the purpose of generalizing the population (Creswell, 2005). In this study, a simple random sampling and probability sampling method was used. A simple random sample is a means whereby all the elements in the population have an equal choice of being selected. From a total population of 150 active drivers and 50 officials, a total of 200 participants were eventually selected for the study.

4.1. Instrumentation

The study made use of a self developed questionnaire which was aimed at finding out more about substance abuse among the drivers. The instrument was subjected to reliability and validity test before use, And the reliability coefficient showed 0.78, while content validity was also used for the instrument.

4.2. Method of Data Collection

The data was collected by going to the field to gather the data, and it was done by going to the field to personally administer the instrument on the drivers and the officials, which was collected back immediately from them.

4.3. Method of Data Analysis

Analysis was based on frequency and percentage frequency of respondents to the items on each of the items on the questionnaires.

5. Results

Age	Responses	Percentages
15- 20 years	40	20
21-25 years	80	40
26-30 years	60	30
31 years	20	10
Total	200	100%

Table 1: Showing the Age Range of Respondents

Table 1: showed that lager percentage of the respondents are between the age of 21-25

Religion	Response	Percentage
Christianity	60	30
Islam	100	50
Others	40	20
Total	200	100%

Table 2: Showing the Religion of Respondents

Table 2: showed that 50 percents of the respondents are Muslims, while 30% are Christians, the rest 20% are into other forms of religion.

Response	Respondents	Percentage
Yes	180	90
No	20	10
Total	200	100%

Table 3: Showing Responses to If Respondents Indulge in Any form of Substance Use

Table 3: showed that 90% of respondent take some form of substance, while 10% responded that they are not into any form of substance

Types of Substance Used	Response	Percentage
Drinks & Smoke	120	60
Drugs	20	10
Smoking Only	60	30
Total	200	100

Table 4: Showing the Type of Substance Been Used by Respondents

Table 4: showed that majority of the respondent smoke and drink. (60%), 10% use drug alone and 30% smoke alone.

Age Group Years	Responses	Percentage
10-15	20	10
15-20	60	30
20-25	80	40
25 and above	40	20
Total	200	100

Table 5: Showing the Age When the Respondents Picked the Habit of Substance Use

Table 5: Majority of the respondents picked the habit between the ages of 20-25 years.

Times Per Day	Responses	Percentage
1-2	40	20
3-4	140	70
5 and above	20	10
Total	200	100%

Table 6: Showing the Number of Time in Which Respondents Involve in Substance Use

Table showed that 70% of respondents take substance 3-4 times per day while 20% takes substance 1-2 times per day.

Substance Practice Abuse	Response	Percentage
Regular	160	80
Occasional	40	20
Not applicable	Nil	
Total	200	100

Table 7: Showing the Frequency in Which Respondents Take Substance

Table showed that 80% of the respondents take substance on regular bases, while the rest 20% takes it on occasionally.

Response	No of Responses	Percentage
Yes	100	50
No	20	10
I don't know	80	40
	200	100%

Table 8: Showing Responses to If Respondents Know If Their Religion Supports Substance Intake

Table showed that 40 % does not know if their religion support substance intake, while 50% of the respondents know that their religion does not support substance intake

Source	Responses	Percentage
Parents	80	40
Friends	120	60
Advertisement	Nil	
Total	200	100

Table 9: Showing Responses to Where the Respondents Pick the Habit of Substance Intake

Table showed that 60 % of respondents got the habit from their friends, while the rest 40 % got the habit from parents.

Response	No of Response	Percentage
Yes	140	70
No	60	30
Total	200	100%

Table 10: Showing Responses to If Respondents Still Indulge in Substance Intake

Table showed that 70 % of respondents still indulge in substance intake.

Reponses	No of Responses	Percentage
Because I cannot do without it	50	25
Because of some situation which I	30	15
cannot Face ordinarily		
Because of the nature of my job	120	60
Total	200	100

Table 11: Showing Responses to Why Respondents Use Substance

Table showed that 60% of the respondents indulge in substance intake because of the nature of their job, while 25% take substance because they cannot do without it.

Experience	Responses	Percentage
I have been in and out of hospital	20	10
I have been involved in accident	120	60
more than twice		
I have been a victim of violence	60	30
crime		
Total	200	100

Table 12: Showing the Experience of Respondents Since They Start Using Substance

Table showed that 60 % of the respondents has been involved in accident more than twice since they start using substance, 30 % has been involved in violent 10% of the respondents have been in and out hospital .

Response	No of Response	Percentage
Yes	80	40
No	120	60
Total	200	100

Table 13: Showing Responses to If Respondents Have Attempted to Stop Substance Use

Table showed that 60 % of the respondents have not attempted to stop substance use, while 40% have attempted to stop the use of substance.

6. Discussion, Conclusion and Recommendation

From the analysis of the data, several results were revealed and their reasons for the outcome of such results, for instance result showed the prevalence of drug abuse among the respondents is between the age 0f 21-30, which is the productive age, the peak of an individual life cycle, hence their will search for job to make ends meet and ake out a living and since there is high rate of unemployment in the country, according to National Bureau of Statistics as many as two-thirds of the population (67%) are out of work, therefore the crave for drug will be so high. Adolescence Health Information Project (2017) also suggested that unemployment is a major cause of drug abuse in Nigeria.

Result also showed that most respondents picked the habit from friends (60%) this suggested peer influence. Peer influence is a major reason for spread of vices in the world and Haladu (2003) had initially asserted that Peer Group Influence: Peer pressure plays a major role in influencing many adolescents into drug abuse. This is because peer pressure is a fact of teenage and youth life. As they try to depend less on parents, they show more dependency on their friends. In Nigeria, as other parts of the world, one may not enjoy the company of others unless he conforms to their norms. Result also showed that 40% of respondents also got their habit from parents, this re-echoed the suggestion of Bandura (1984) who asserted that behaviors are learnt, also Haladu (2003) suggested that lack of parental control and supervision engenders drug abuse. Also, the Adolescent Health Information Project (2017), high divorce rates and a resulting breakdown in family values contribute to drug use. Idowu (1987) found that students smoke and use drugs at the instance of friends/peers, parents and television/radio advertisements. Oladele, (1989); Okorodudu & Okorodudu (2004); and Enakpoya (2009) in their studies showed that adolescents were very susceptible to the influence of their peers

Result showed that 60% of respondents also indulge in substance abuse due to nature of their job, this gives credence to the assertion of Haladu (2003) who opined that the Need for Energy to Work for Long Hours: The increasing economic deterioration that leads to poverty and disempowerment of the people has driven many parents to send their children out in search of a means of earning something for contribution to family income. These children engage in hawking, bus conducting, head loading, scavenging, serving in food canteens etc and are prone to drug taking so as to gain more energy to work for long hours. 15% of respondents said they use substance because they want courage to face situation which they cannot face ordinarily, this supports they assertion of Faroe (2012) who suggested that people who usually feel inadequate have been known to use drugs to achieve social acceptance. Studies like that of Okoh (1978), Oduaran (1979) and Johnson (1979) further laid credence to this fact, they exhibit a plethora of purposes for which students use drug. The list includes curiosity, boldness, and friends-do-it, enjoyment of social gathering, academic pressure, sound-sleep, sexual-prowess, and performance in sports. Result showed that 15% of respondents could not do without it, this shows addiction, the sense of addiction was further revealed in the study when result showed that respondents take the substances 3-4 times per day and 70% use the substance frequently, this supported the assertion of Osikoya & Ali (2006) asserted that socially, a drug abuser is always pre-occupied with how to obtain drug of choice and crave for the substance.

Result showed that 30 % of respondents have been involved in violent crime, this is in unison with the assertion of Esen (1979), his studies suggested that drug abuser always have behaviors that are inconsistent with the society which mostly leads to violent crime. The study also showed that 60% of respondent have not attempted to stop the use of drug use, hence

they don't see as a problem, which indicates that they are insightful, 40% showed that they have attempted to stop it but eventually relapsed

6.1. Conclusion

From the result, the following could be concluded

- Substance abuse is more prevalent between the age of 21-30
- Most of the respondents are into some form of substance abuse, hence most commercial drivers in Osun state are into drug abuse
- Most of the respondents abuse both alcohol and substance
- Most of the respondents picked the habit between the age of 20-25
- Most of the respondents are not religious, only 40% knows that their religion is against drug abuse.
- Most of the respondents were influenced by peer influence, while the parents also played role in getting involved in drug use.
- Most of the respondents used substance because of the nature of their job, while others used it to get courage.
- Most of the respondents have been involved in accident at least twice within the year.
- Most of the respondents do not see it as a problem.

6.2. Recommendation

The following recommendation could be made based on the discussion

6.2.1. For the Government

The study showed that respondents picked the habit between the ages of 20-25, which is a productive; therefore the government should as a point of duty

- Bring out programs that will majorly focused on this age group, to enable them harness their potentials instead of going into drugs
- Provision of jobs is also very important, over ten million jobs as being lost in the past two years Nigeria and unemployment is a major reason for increase in drug abuse.
- Strong institutions should be established and stronger laws should be enacted to stamp out the menace of drug abuse.

6.2.2. For the Parents

- They should be good examples to their children /wards
- They should watchful about the kind of friends their children keep
- They should seek for professional help, if their child is already into drugs.

6.2.3. For Mental Health Professionals

Aggressive therapy sessions in order to engender behavioral re-engineering in the society.

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