Exploring Factors Influencing Substance Abuse among Young Individuals Receiving Treatment for Substance use Disorder in Ogbomoso, Nigeria

Samson F. Agerotimi Ph.D
femiagberotimi@gmail.com

Abstract: Nigeria is currently witnessing an alarming increase in the rate of substance use and abuse among the youths and emerging adults. The disturbing phenomenon, undoubtedly constitute great threat to the entire society. Understanding the predisposing and perpetuating factors to substance abuse is crucial in stemming the tides of this menace. The present study is hospital-based aimed to explore factors influencing substance abuse among young individuals receiving treatment for substance use disorder in a tertiary hospital in Ogbomoso, Nigeria. Exploratory study was conducted among young individuals receiving treatment for substance use disorder in Ogbomoso, Nigeria. Twenty (20) purposively selected young adults (12 males, 8 females) receiving treatment for substance use disorder at Bowen University Teaching Hospital Ogbomoso, participated in three focus group discussions (male, female, and a mixed-gender groups), while two individuals were involved in separate in-depth interviews. Seven key themes (curiosity, peer pressure, enhance performance, boost self-esteem, cope with unpleasant emotions, frustration, and get high) emerged from the focus group discussions and in-depth interviews. It was concluded that the factors identified in this study should guide substance use disorder treatment development and implementation for improved outcome in Nigeria.

Keywords: Substance use disorder, focus group discussion, in-depth interview, youths, Ogbomoso.

Introduction
Psychoactive substance use and abuse remain one of the major global public health challenges (UNODC, 2013). The fifth edition of the Diagnostic Statistical Manual of Mental Disorder (DSM 5) combines the DSM-IV categories of substance abuse and substance dependence into a single disorder (substance use disorder) measured on a continuum from mild to severe. According to the DSM 5, diagnosis of substance use disorder (SUD) as applicable to all
classifications of substances (except caffeine, which cannot be diagnosed as a substance use disorder) requires minimum of two symptoms from a list of eleven, the revision which has been asserted to make diagnosis better match the symptoms that patients experience (APA, 2013).

The problem of substance abuse has grown to become a prevalent part of the contemporary society, and more disturbing is the recent surge in the rate of involvement of the young population in this damaging phenomenon. Until recently, cases of substance use and abuse are commonly associated with the adult population, but current findings have established the spread of psychoactive substance use to the younger populations potentially leading to addiction (Bonomo & Bowes, 2001, World Health Organization, 2005). The report of UNODC (2013) also established that youths especially in Africa engage in utilizing different kinds of psychotropic substances. Similarly, in 2014, the West Africa Commission on Drugs reported that there is now a higher consumption and dependence on drugs particularly among young people in the West African countries.

When compared with the rest of developing countries, Nigeria is rated among the largest consumers of harmful psychoactive substances like cannabis, tobacco, alcohol, benzodiazepines, cocaine and opioids (Degenhardt, Chiu, Sampson, Kessler, Anthony, Angermeyer et al., 2008). In other words, it can be concluded that the problem of drug abuse is more prominent in Nigeria compared to most other developing nations. This was corroborated by Adamson, Onifade and Ogunwale (2010) that many people of younger age are getting engaged in the consumption of illicit drugs in Nigeria. Azuike, Oni and Dirisu (2012) further asserted that young grown-ups whose ages are in the range of 18 years and 25 years old constitute the populace that are most astoundingly powerlessness to psychoactive drugs misuse, at the same time, young people between 11 and 17 years accounted for the second most astounding populace with vulnerability to drug abuse.

The need to find a lasting solution to the problem of substance use disorder cannot be overemphasized as evidence has shown that the problem is not limited to the population that abuse drugs but the entire society. The UNODC (2007)’s report affirmed that the problem and negative impact of substance abuse is such that affect almost every country of the world only in different dimensions and degrees. Furthermore, drug abuse constitutes a great threat to families, society and the entire nation, causing unimaginable damage in all spheres of human endeavours such as health, occupation, interpersonal and social, and economic spheres (Massah, et al., 2015).

From the foregoing, understanding the predisposing and perpetuating factors to substance abuse is crucial in stemming the tides of this menace. Although several studies have documented diverse factors (e.g. experimentation and curiosity (Oshodi, Aina & Onaole, 2010, Adekeye, 2012), peer influence (Rohrbach, Sussman, Dent, & Sun, 2005), low self-esteem and unpleasant emotions (Radin et al., 2006), and desire to get high and increase sexual performance (Chikere & Mayowa, 2011) in
explaining development and continuous use of psychoactive substances among Nigerian youths, many of such studies are surveys conducted among the general population which may be lacking in specificity and depth. The present researcher, therefore, embarked on a hospital-based qualitative study to explore factors influencing substance abuse among young individuals receiving treatment for substance use disorder in a tertiary hospital in Ogbomoso, Nigeria.

Methods
Design
The study was exploratory, utilizing focus group discussion (FGD) and In-depth Interview among purposively selected participants. To gain in-depth insight into the factors influencing substance abuse among youths, a qualitative study was conducted to explore the perspectives and experiences of youths with substance use disorder. Three FGDs and two IDIs were conducted among treatment seeking drug-using individuals in Ogbomoso, Nigeria.

Setting
The study was conducted at the Bowen University Teaching Hospital (BUTH), Ogbomoso, Nigeria. The hospital is at the heart of Ogbomoso, Ogbomoso North Local Government Area, Oyo State. BUTH, formerly known as Baptist Medical Centre, established March 18, 1907 was transformed to a Teaching Hospital in 2009. The hospital has over 400 Bed Capacity and over 800 Staff and Students. The hospital runs on multidisciplinary facility, running Residency Programme in Family Medicine and Programmes in Nursing and Midwifery.

The Drug Rehabilitation Unit of the hospital began operation in June, 2014. The unit operates on an Intensive Outpatient basis. Treatment modality of the unit is based on the disease model of psychoactive substance, the disorder being regarded as a chronic one requiring long term and holistic treatment approach. Major treatment components are Drug Education, Twelve-Steps, Relapse Prevention and Social Skills Training, Spiritual Therapy, and Counselling. Treatment is delivered via Group therapy, Individual therapy, and Family therapy. The therapeutic team of the unit consists of Doctors (Psychiatrists), Nurses, Psychologists, Social Workers, and Spiritual Therapists.

Participants
Twenty-two (22) participants were recruited from a drug addiction treatment unit of the Bowen university teaching hospital, Ogbomoso, Nigeria. As a strategy for enhancing participation, homogeneous focus groups in terms of gender, age and educational qualifications were formed. The first group of the FGD comprised of six (6) only male participants, the second group was made up of six (6) females only, while the third group is a mix of eight (8) male and female respondents. Two (2) respondents (a male and a female) were involved in the IDI separately. Participants ages ranged between 18 and 24 years (mean = 21.14years, SD = 1.76).

Instrument
Tools for data collection during the focus group discussion and interviews are the semi-structure question guide, tape recorder, paper and pen.
Procedure
Ethical approval was obtained from the BUTH Research Ethics Committee (No: NHREC/12/04/2012) to conduct the study. Participants were recruited from the Drug Unit of the BUTH. Potential participants were contacted physically and through mobile phone to seek their interest for participation in the study. Meetings were later arranged with individuals who showed interest in the study, during which the purpose and modality of the study were discussed.

To be included in the study, participants must be between 18 and 24 years, be a user of at least one psychoactive substance, and able to communicate in English language. Detailed statement of informed consent that contained the purpose, procedures, potential risk(s) (if any) and benefits of participating in the study was later given and explained to each of the participants who met the inclusion criteria and consented to participate in the study.

Both the focus group discussion (FGD) and interviews were conducted using a semi-structured guide. Demographic information of the participants was collected and open-ended questions were used. The FGDs lasted for between 53 and 75 minutes, while the lengths of the two in-depth interviews are 47 and 55 minutes.

The interviews were transcribed verbatim. An initial line-by-line open coding was used to categorize and summarize the data (Glaser, 1978), followed by more focused coding centered on the significant codes and categories that tended to be more conceptual. This facilitated comparative analysis, aimed at comparing data to data, and data to codes and categories in order to identify similarities and differences.

Results
Themes
After analysis of the transcripts of the focus group discussions and in-depth interviews conducted, the following overarching themes emerged.

Curiosity
Participants indicated that one of the main reasons why they are involved in substance use is out of curiosity and for the thrill of it. They noted that the reason why they have tried several substances and have regular ones they consistently use is because they want to know how it really feels to be on such substances. One participant stated:

*The first time I smoked igbo (marijuana) nobody offered me. Although I was very scared o, but I walked up to a seller at joint where I drink and I bought a wrap. I remembered that the only thing I was telling myself was that I just want to know what these people that smoke get from this thing (marijuana). And that’s how I started smoking. I didn’t find it difficult because I already know how to smoke cigarette although I stopped it because I don’t just like it.*

*FGD3/Male/18*

Peer Pressure
Across the three focus groups and interviews, participants reported peer or social pressure as drive for their substance use both at the initial stage and for continuous use. Many of the participants expressed that their first drug use was in the company of their peers where they were offered and encouraged to use. A sub-theme identified within this overarching theme is low assertiveness, because
the participants further argued that use in situations where drugs is usually offered, it is almost impossible to say no because they would want to feel among. One participant offered a statement that was representative of the comments of the group participants:

The truth is you have friends that you associate with in many areas, you play together, party together, visit places together... and some of them have encouraged and supported you to do some pretty good stuffs. Obviously you don’t want to lose them, so when you find out some do drugs and you are offered, of course you want to feel among, feel cool and keep your friends.

FGD1/Male/22

Another participant further expressed that...

...using substance in the company of my friends and sometimes with my boyfriend is what I will say made me become a regular user of codeine and weed. You know, life is sweet in the company of friends (smiles)...

IDI1/Female/20

**Enhance performance**

The discourse of the group participants also acknowledges that performance enhancement is a credible reason for use of psychoactive substances. They noted that whatever one’s interest is, substance use can help one to achieve a better performance whether in academics, sports or sexual intercourse. One of the participants expresses himself in these statements:

I actually started using tramadol out of my desire to satisfy my sexual partner by lasting more time in bed. I read it up online that tramadol is good for sex. I started with tab tramadol 50mg which was able to improve my sexual performance, however I subsequently discovered that it also make me to stay awake, more agile, think better and work longer than usual. I love the feeling because I really have more confidence.

IDI2/Male/24

In the words of another participant, Smoking cannabis makes me to hear and understand beats better and thus helps me to do a nice free-flow rap to music. I love music; I rap and want to do well in it. So seeing the benefit of smoking to my music career, I was like what’s the point of not smoking even when people that know about my smoking try to talk me out of it.

FGD1/Male/23

**Self-confidence boost**

Boosting self-esteem/confidence emerges one of the overarching themes of the focus group discussions. The participants reported that one of the reasons why they would find it difficult not to use substances again is the issue of confidence to deal with some situations especially in social interaction. They argues that being on certain substances just get you more confident, in fact the feeling you have is that you feel important at that point such that you know that you are on top of situations without having to feel embarrassed. One participant shared an experience that summarized the general feeling and opinion of the groups:

Before I started smoking weed and popping codeine, I usually feel shy and find it difficult to speak up my mind during interaction with people. It got bad that I can’t even ask a lady out for a relationship. So when I told one of my friends that is a drug user, he told me that if I start smoking weed it will make me feel bold and free to do...
anything I like, so I gave it a try. After some weeks I noticed that I always feel bold to talk with people anytime I smoke, so I see it as a cool thing.

FGD3/Male/19

Alter negative/unpleasant emotions
There are many of the respondents who acknowledged that they engage in substance abuse because substances help them achieve a desirable good feeling especially when they are experiencing negative emotions, depression and anxiety in particular. Specifically, they describe the positive feeling they achieve by taking drugs as a strong motivation for continuing substance use. Two participants emphasized this point by saying:

Of course I know that doing drugs is bad and not admirable by my family members. In fact I succeeded in hiding it from people for a long time. But it serves me purpose nothing or no one has in a long time. Smoking skunk and popping codeine is a major way of escaping from my worries and depressed mood.

FGD2/Female/20

The point was reinforced by the expression of another respondent…

I think I have anger issue because little things get me pissed off easily. But anytime I am on drugs I am always happy, in fact if anybody does anything to annoy me at such times I am on drug, I don’t even see it, I just smile and walk away. And it’s ok by me, because people say I am a cool guy.

FGD1/Male/21

Frustration
Most members of the groups were of the opinion that they usually turn to substance use in order to feel better whenever they feel frustrated about situations, mainly those regarding their school and home environment. One participant describes his frustration in terms of his inability to achieve his valuable personal goals because of the structure that exists in his school. These feelings of frustration are summed up in the words of one participant who explained:

I am just angry at a lot of things. For instance, I don’t understand why my parents will not let me even pursue anything I want for myself. First, they chose university for me, second the course I am studying, to the extent of even having my life after the university planned already. My opinion does not count, I am sick of it. And the university system too does not help the situation, there is too much pressure around, too much expectation and our lives are designed for us such that no one is free to decide what to do daily and how to do it. Now I find solace in hanging out with my friends and we smoke and drink together. Cigarette in particular makes me relaxed.

FGD3/Female/24

Get high
To have time passed because of boredom: this is as a result of no meaningful engagement. The participants expressed that most of the activities they engaged in are not those that actually make meaning to them. According to them, it is frustrating having to just participate in activities lined up by the school authority when they don’t even seem to derive any sense of fulfillment or satisfaction. So in order to appear as a law abiding students, it then becomes a norm to be on a substance such as codeine and rohypnol which can make them to be physically present but absent.
... drugs can help you have good time and be happy, no dull moment
FGD3/Male/24

Discussion
The present study explored factors influencing substance use disorder among treatment-seeking youths in a hospital setting in Ogbomoso, Nigeria. Results of the focus group discussions and in-depth interviews conducted revealed some core factors that influence initial involvement in substance use as well as factors that contribute to addiction process. Curiosity, peer-pressure, performance enhancement, self-esteem booster, coping with negative emotions, frustration, and bid to get high emerged as the key themes from the analyses of the FGD transcripts.

It was established that eagerness to experiment with drugs in a bid to satisfy curiosity about drugs is one of the major factors that reinforce drug abuse among the youths. Some of the participants noted that availability and ease of access to some drugs, as well as their involvement in other drugs and information about drugs usually encourage them to experiment with new drugs which often lead them to regular use and sometimes develop dependence on the drugs. This result is quite as expected considering the age category of the participants. The period of adolescence and young adulthood has been identified as a time when individuals have high tendency to explore and try different things including risky behaviour such as substance abuse. This is in line with the assertion of Oshodi et al., (2010) and Adekeye (2012) that youth is a period full of want to experiment, test and look for dynamic answers for issues which is implicated in the high prevalence of drug abuse among people of this age group. This implies that significant people in the lives of the youths should intensify efforts in helping the youths channel their inquisitiveness and energy towards productive and healthy activities in order to reduce the prevalence of risky and destructive behaviours among the population.

From the findings of the focus group discussions and in-depth interviews, it was also revealed that peer influence is a strong factor leading youths to engage in substance use and abuse. This is expressed as desire to be like others and freely associate with peers. There was a consensus among the participants about their drug use being reinforced by their friends, especially drug-using peers. While some of the participants indicated that their first drug use was introduced by their peers, others affirmed that they were encouraged to continue using substances because their friends use and they want to maintain relationship with them as well as conform to standard of behaviour in the group they identify with. Identity formation and crisis have been postulated as part of the main features of youth. A period of adolescence and youth are also described as the phase in life when individuals often break away from parental identity and shift towards identifying with peers (Rohrbach, et al., 2005). In essence, there is a high tendency for young ones to easily yield to perceived and real pressure from peers at this stage of their life, which at times means participating in same behaviour with peers they associate with, and daring the consequence of such behaviour. In 2000, Michell, expressed that through
the process of peer group structure, young people may easily get influenced by their contemporaries/peers to use or abstain from alcohol and drugs.

Results of the study also showed that psychoactive substances are used by the young individuals to enhance performance. According to the participants of the discussions, it is a general knowledge and belief among their population that using some forms of substances such as cannabis and prescription drugs would help them attain a higher level of performance in various activities including academic. For instance, many of the participants expressed that taking drugs help them stay awake for longer hours to read/study. Another major performance enhancing activity that drugs are commonly used for among the young individuals as revealed from the findings of the present study is sexual performance in terms of boosting energy and sex drive to last longer in bed. Other common activities that drugs are used for include musical purposes, sporting activities, and partying. One probable explanation for this finding is repeated and indiscriminate exposure of the young individuals to substance use and abuse via the mass media such as television and other advertising outlet whereby alcohol and drugs are usually associated with performance and fancy lifestyle of celebrities and artists. Previous studies have also established that increase in drug abuse among the youths is associated with how substances are being portrayed in the media such as music videos. This finding is corroborated by the report of Chikere and Mayowa (2011) that substance abuse by the young individuals is reinforced by feeling good, peer pressure, feel high, and to enhance sexual performance.

In a similar vein, participants of the FGDs and IDIs argued that substance use behaviour provides a huge boost to their self-esteem. In the course of the discussions, it was found that youths engage in use and abuse of drugs because they believe that using drugs make them become more confident especially in social interaction, feel good about themselves, and gain respect from others. According to the finding, using drugs is perceived by the youths as solution to certain inadequacies in social interaction such as not being able to firmly express one’s need, opinion or desire to others. This suggests that young people with substance use disorder may at the same time have problem of non-assertiveness and poor self-concept. According to Radin et al., (2006), low self-esteem is a potent contributor to adolescent alcohol and drug abuse. This implies that helping young individuals with problem of drug abuse may require helping them to develop assertive communication style and positive self-image.

Furthermore, it was established from the outcome of the discussions that young individuals engage in substance use behaviour because they seek to find a quick fix to certain stressful and emotional problems they experience. Coping with negative and unpleasant emotions which could be in form of easing off daily stress, feeling calm, dealing with provocations/anger, and forgetting ones problems constitute some of the good sides of drug abuse identified by the participants of the FGDs. This finding is plausible because most of the participants abuse
drugs that stimulate calming sensation in the brain and body such as sedatives and opiates, and thus have been associated with good feeling in the face of stress or threat. This implies that young people often engage in drug abuse as a coping mechanism for their problems. This form of coping mechanism is however, unhealthy, only complicating their problems and creating new ones in the long run.

Conclusion
Results of the focus group discussions and in-depth interviews revealed some key reasons for drug involvement among the population. Factors that influence both initial involvements in substance use as well as factors that contribute to addiction process were explored and seven key themes (curiosity, peer-pressure, performance enhancement, self-esteem booster, coping with negative emotions, frustration, and bid to get high) emerged. With regards to the findings of this study, practitioners and other stakeholders in management of substance use disorder should inculcate the identified factors into development and implementation of substance use disorder treatment protocol for improved outcome in Nigeria.

References


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