Assessing the Determinants of Drug Use and Abuse among Gender in a Residential Neighborhoods of Calabar South Local Government Area, Nigeria

E. Ojong. Felix[1], Joseph. K. Ukwayi[2]

Department of Sociology, University of Calabar, Cross River State,
NIGERIA.

[2] jukwayi@yahoo.co.uk

ABSTRACT

This paper seeks to examine the rate of gender use and abuse of drug in residential neighborhoods of Calabar South Local Government Area. A total of six hundred copies of questionnaire were randomly distributed in recreational and entertainment centres where majority of people usually converge during leisure hours. The questionnaires captured the socio-demographic characteristics, factors influencing drug use and abuse among age group and the challenges of drug use and abuse in the study area. The data collected revealed that the socio-demographic characteristic factors greatly influenced the rate of drug use and abuse among males compared to female gender in the area which was evidenced in the result of the tested hypothesis with a high calculated value. However, it was observed that socio-demographic characterizes were the major determinants that have influenced the rate of drug use and abuse in the study area. Therefore, the agencies concern must put adequate measures to avert the rate of drug use and abuse in the study area.

Keywords: Abuse, Calabar, drug, gender, residential

INTRODUCTION

In recent times, many scholars have advocated those drugs are substance taken by some people to get certain effect such as happiness and excitement. Driving from these definitions (Watt, 2004) gave a classification of drug which according to him include soft drug and hard drug. Today, many factors cause drug abuse among gender in our society. Those factors may arise from peer pressure which is youth association. Depression which occur when certain event which affect one emotion (UNDCP, 1997).

Accordingly, (Nestler, 2004) in his empirical findings observed that one of the cause of drug abuse among gender is the rate of unemployment in most developing cities of the world. In Nigeria, the rate of illegal drug consumed and the negative use of drug such as alcohol, pharmaceutical drugs inhalants and other solvents has increase over the years. However, empirical findings have shown that Nigeria is the highest consumer of cannabis and amphetamine in Africa (WHO, 2000).

In Cross River State especially Calabar south Local government area the rate of gender abuse and abuse of drug is over alarming, this has caused many scholars to ask which groups of individual are vulnerable to drug use and abuse in the area. Besides, Calabar south local government area constitutes a major location with numerous recreational centers and entertainment joints. These locations constitute areas where all categories of people are usually found especially during their leisure hours. Moreso, during this period majority of them are found drinking and smoking all types of cigarette which is the basis of this work to critically assess gender abuse of drug in Calabar south with specific reference to evaluating

the socio-demographic variables influencing gender abuse of drug, drug classification and users, gender variation in drug abuse among age and the challenge of drug abuse in the area.

METHODOLOGY

This study was conducted in Calabar South Local Government Area taking into consideration six major streets with high rate of recreational facilities (entertainment look). However, six hundred copies of questionnaire were randomly distributed to different groups of people which include both male and female. Moreso, in each of the street, three entertainment location were captured. The rational for using the entertainment locations is because these are locations where majority of the residents and visitors converge for leisure and at the same time this are locations were drinking, restaurants, bar and hotels are located. Nevertheless, the questionnaires were administered to only those involved in alcohol drinking, cigarette smoking and other drug users. The analysis of variance (ANOVA) was used to test the hypotheses which try to investigate if or not there is a significant variation in the drug users in the six streets use for this study

LITERATURE REVIEW

Issues of Drug Abuse

Today, many theories emphasize that the different categories of people possesses a wide repertoire of behavior (Maier, 1970). Maier (1970) in his opinion suggests that an individual is a "community of selves" from which the individual may adopt different perspectives further stating that this "community of selves" of individuals represents a flexible framework within which to represent many aspects of their experiences in region to themselves and others. However, these shown below theories below are employed in this paper to through light on the drug use and abuse issue surrounding different categories of people in a given community. Accordingly, Pasche, Myers and Adams (2010) have attempted to integrate sociological observation of the significant of peer influence on individual's behavior in his learning theory, peer grew model of addiction cycle.

This approach is derived from the Hullian Theory in that drug-taking behavior is learned and is subject to habit strength which increases through repetition and reward. The initial lop decision experiment with drugs can be schematized on approach, tendency and increase with individual perception of certain advantages of taking drugs at any given point in time However, the responses of taking drugs are of minimal habit strength because such behavior has not been engaged previously. The low position in hierarchy operates in the direction of avoidance Such factors like fear of consequences and moral reservations may reduce the tendency of taking drugs But incentives such as curiosity and the desire for peer group approval will interact with these factors to produce approach so that the potential user resolves the approach-avoidance conflict in favor of taking drugs. If the first experience with drug is rewarded by social and physical pleasure, this act of taking drugs is reinforced. Such habit's strength increases each time drug taking is reported and regarded the user may experience the unpleasant withdrawal symptoms, and to avoid them, he has to use more drugs, therefore acting as an additional motivation for maintenance of the drug habit, hence addiction.

The principle underlying this model is that the peer group values and norms are transmitted to an individual through consistent rewarding of the conforming behavior. Both initial and continued drug use are based on membership in a peer group that approves of and is involved

in drug taking, given these conditions, the social incentives for drug taking are obvious and will vary with the individuals' perceived value of group membership. A former addict may decide to abstain from drugs, but finds he unable to join non-using groups. Habit strength of drug taking is once again increased as the former addict rejoins his old peer group and pressure to conform reactivate the addictive cycle.

Personality Predisposition Theory

In recent times, researchers believe that drug abuse can be linked to an individual's personality (Wessels 2002) and that the ego structures of some individuals predispose them to depend on substances. Castillo (1997) revealed that every individual has the need to alter his mood with a substance. The argument of the personality predisposition theory is that substance of the related disorders is connected with personality and thus can be traced back to an early life experience or trauma in childhood. The view holds that the individual will self-medicate to compensate for psychological problems.

According to Wessels (2002), Deseiko (1999 and Castillo (1997) in their empirical assessment of drug use and abuse pointed out the close link between substance related disorders and others such as contact disorders, anti-social personality disorder, borderline disorders, mood disorder and schizophrenia. Accordingly, Kariuru (1988) has observed that there are relatively more drug users among boys than girls, especially in the age of 17-21 years. Explanations given for this difference are due to the male tendency to "drift" to the drug use especially through curiosity motivated by friends/peer group members.

Karagu and Olela (1993) has reported that drug use is a non-gender issue: the only difference is that males tend to use more drugs than their female counterparts. Males appear to spend more money on drugs than their female counterparts. However, Haworth (1981) has also conducted a survey of alcohol and drug use amongst anonymous to be used was pre-tested among standard seven primary school pupils and later administered to 167 boys and 168 girls in form one, two and four. There were differences between sexes in that cannabis was more prevalent among while girls were more likely to take other drugs. The study revealed that 58% boys and 57% girls had taken alcohol sometimes in life, 30% boys and 105% girls had taken cannabis. 24% boys and 26% girls had taken other drugs like miraa, tranquilizers and pep pills.

FINDINGS

Determinants of Drug Use and Abuse

The major determinants of drug use and abuse as presented in table 1 show that factors such as age, sex, marital status, peer pressure, poverty, unemployment and level of education. However, table 1 revealed that out of the aforementioned variables, majority of the sampled population were with the opinion that the above factors were responsible for drug use and abuse in the area with a high value of 26.66%. Table revealed that poverty and peer pressure are the major determinants of drug use and abuse in the followed by unemployment and level of education with values of 15.8% and 13.16%. Although, sex and age were also found to be determinants of drug use and abuse even though they did not constitute a major determinant of drug use and abuse with values of 7% and 6.16% while marital status was on the least side with a value of 6%.

Table 1. Determinants of drug use and abuse

Factors	Level of Use and Abuse of Substance				Total	Percentage
	High	Medium	Low	None		
Age	10	8	9	10	37	6.16
Sex	19	12	11	-	42	7.00
Marital Status	14	10	8	8	40	6.70
Peer Pressure	33	34	31	30	128	21.33
Poverty	41	36	40	38	155	25.83
Unemployment	23	27	34	35	119	15.83
Level of Education	20	18	20	21	79	13.16
Total	160 26.66**	145 24.16	153 25.5	142 23.66	600	100

Source: Field survey, 2012

Drug Classification and Users

The drug classification and users presented in table 2 show that out of the six hundred sampled populations in the major streets in Calabar south local government area about two hundred and ninety eight respondents are of the opinion that alcohol and cigarettes are the major drug consumed and use in the major streets. This result indicate that about 40.66% and 33.00% of the total sampled population involved in both alcohol and cigarette consumption. Although, it was observed that 70 of the total sampled population affirmed to the fact that most people consumed tea while the rest out of the sampled population are more vulnerable to taking Aspirin and Heroin with values of 7.66% and 7.0% respectively.

Table 2. Drug classification and users in the various street

Major Street	Drug Classification					Total
	Alcohol	Cigarettes	Aspirin	Heron	Tea	
Ekpo Abasi	46	30	8	6	10	100
Inyang Edem	41	35	10	5	9	100
Musaha Street	40	40	5	5	10	100
Inyang Street	35	43	7	9	6	100
Edibedibe	31	30	100	9	20	100
White house	51	20	6	8	15	100
Total	244 50.66**	198 33.00**	46 7.766*	42 7.0*	70 11.66	600

Source: Field survey, 2012

Drug Use and Abuse among Gender

The level of drug abuse among gender presented in figure 1 indicates that out of the hundred sampled population in the major streets about four hundred and thirteen people affirmed that male are more involved in drug abuse while only one hundred and eighty seven sampled population attest to the fact that female are also involved in drug abuse. However, figure 1 revealed that alcohol consumption was on the high side among gender with value of 54.5% compared to cigarettes with a value of 28.0%. However, it was noticed that among the gender over 59.32% of the male were more involved in alcohol consumption compared to female

with a value of 43.85%. This result was also observed in the rate of cigarette smoking which show that more number of male abuse the rate of cigarette smoking compared to the female with a value of 29.29% and 25.15 respectively.
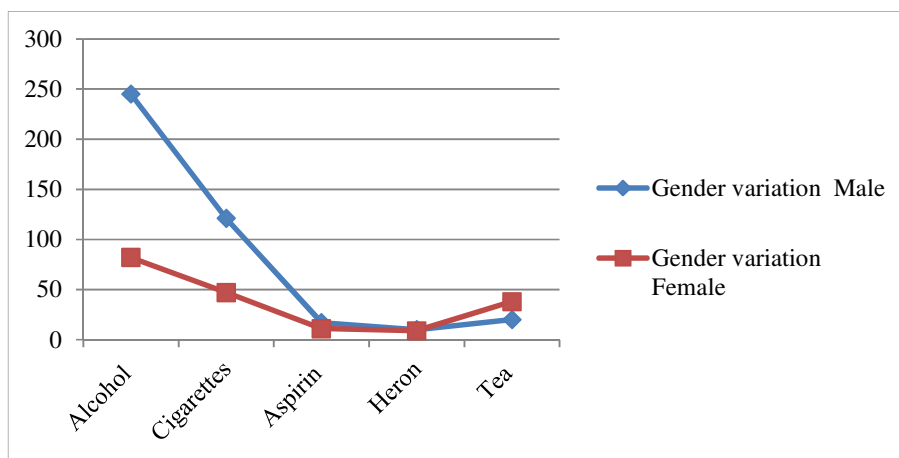

Figure 1. Gender variation on drug use and abuse in the area

Source: Field survey, 2012

Drug Use and Abuse among Age Distribution

The rate of drug abuse among age distribution presented in table 3 show that gender in the age bracket of fifteen to thirty five years are more involved in drug abuse as shown in the table with a value of 38.0% followed by twenty five to thirty five years with a value of 36.5% while gender in the age bracket of one to fifteen years and thirty years and above were not seriously involved in drug abuse with values of 8% and 17. %%. However, it was observed in table 3 that out of the sixty sampled population, it was noticed that majority of the people are used to the abuse of alcohol and cigarette smoking while aspirin and heroin was on the least side with values of 8.16% and 6.83% respectively.

Table 3. Drug use and abuse among age distribution

Age distribution	Drug Abuse					Total	Percentage
	Alcohol	Cigarettes	Aspirin	Heroin	Tea		
1-15yrs	10	23	4	3	8	48	8.0
15-25yrs	83	95	21	8	21	228	38.0
25-35yrs	94	35	19	20	51	219	36.5
35 and above	23	32	5	10	35	105	17.5
Total	210 35.0**	185 30.83	49 8.16*	41 6.83*	115 19.16	600	100

Source: Field survey, 2012.

Challenges of Drug Abuse in the Area

The challenges of drug abuse presented in figure 2 revealed that the major challenge of drug abuse was that it effect the brain and reduces individual coordination as shown in the table is with values of 24.66% and 22.66% followed by unconsciousness and alternation of individual with values of 19.5% and 11.66%. However, on gender bases it was observed that both the male and the female are of the opinion that drug abuse affect the brain and reduces coordination as noticed in figure 2 with high values of male 13.66% and 15.16% while

477

female 11% and 7.5% even though female still believed that drug abuse caused unconsciousness and causes decrease in alertness with values of 11.66% respectively.
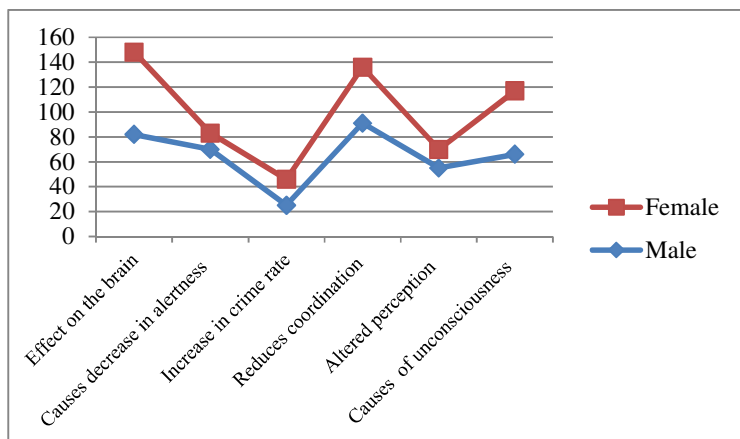

Figure 2. Challenges of drug use and abuse in the area
Source: Field survey, 2012.

RECOMMENDATIONS AND CONCLUSION

In Calabar South Local Government Area, the rate of recreational centers has aided increase in drug use and abuse in the area. However, it has been observed that the increase in drug use and abuse has caused increase in crime rate in the area. This situation has caused majority of the residents in the area to live in fears especially during events period such as the carnival .To this end the research put forward the following recommendations if the problems of drug use and abuse be averted in the area

1. The government should put adequate mechanism to control and reduce the rate of recreational and entertainment centers which is the major areas where residents and visitors converge during their leisure time

2. The regulatory body in charge of drug use and abuse must put adequate mechanism that would control the use and abuse of drug in the area

3. The government should make sure that those involved in drug abuse are punished, this would help reduce the rate of drug use and abuse in the area

4. The people should be enlightened on the dangers associate with drug use and abuse in the area.

CONCLUSION

Today, the problems of drug use and abuse has generated serious of crises due to the fact that most of the areas where this drugs are sold are prone to high crime rate as evidenced in the data collected. However, this research has shown that out of the six hundred sampled population in the study area over four hundred and thirty one were involved in drug use and abuse with a least value of one hundred and eighty seven which show that 68.88% of the sampled population that engage in drug use and abuse were male while female gender were on the least side with a value of 31.18%. Besides, it was observed that poverty and peer pressure were the major determinants of drug use and abuse in the study area. Although other indications were on the least side. Therefore, it is the responsibility of all the stakeholders to make sure that those involved in drug use and abuse in the study area are effectively punished.

REFERENCES

[1]   United Nation International Drug control programme (UNDCP) (1997). World drug report. New York: Oxford University Press.

[2]   World Health Organization (2000). Guide to drug abuse epidemiology (an informal publication). WHO/MSD/003, pp.1-25

[3]   Watt, K. (2004). *Risk of injury from acute alcohol consumption and the influence of confounders. Addiction, 99*(10), 1262-73.

[4]   Nestler, E. J. (2004). The addicted brain. *Scientific American, 290*, 78-85.

[5]   Haworth, A., Nyambe, B., Ng'andu, S., & Sinyangwe, I. (1981). *Alcohol and drug abuse use amongst students in Zambia: A report. University of Zambia,* Educational Research Bureau, Interim Report.

[6]   Kandel, D., Single, E., & Kessler, R. C. (1976). The epistemology of drug use among new York state high school student: distribution, trends and changes in the rate of use. *AMJ public health, 66*(1), 43-53.

[7]   Karagu, D. M., & Olela, A. O. (1993). Questionnaire on use of drug and alcohol in Kenyatta University. Pathfinder Fund. www.jeteraps.scholarlinkresearch.org

[8]   Kanuki, D. G. (1988). *The Levels, trends and Patterns of Drug Addiction in Nairobi Secondary Schools*. M.A Thesis. Kenyatta University.

[9]   Kombo, D. K. (2003). *The status, impact and management of HIVAIDS*. Nairobi: UEA publications.

[10]   Maier, N. R. F. (Ed.). (1970). *Problem Solving and Creativity in Individuals and Groups Belmon*t. CA: Brooks/Cole.

[11]   Mouti, B. O. (2002). *The Bitter Fruit of Drug Abuse.* Nairobi, Kenya: Pauline's Publications

[12]   Mottran, D. (1996). *Drug in sport* (2nd ed.). London: E. and F.N. Spon.

[13]   NACADA (2004). Youth in Peril: Alcohol and Drug Abuse in Kenya. Report of the 2002 baseline survey. Kenya.

[14]   Ndambuki, E. K. (2003). *Guidance and Counselling in schools*. Nairobi: Strong wall Africa.

[15]   Nowinski, J. (1990). *Substance Abuse in Adolescents and Young Adults*. New York: W. W. Norton O'Conner.

[16]   Oloo, N. (2003). *Drinking.* Nairobi: Pauline's Publications Africa.

[17]   Myers, B. J., Pasche, S. & Adams, M. (2010). Correlates of substance abuse treatment completion among disadvantaged communities in Cape Town, South Africa. *Substance abuse treatment, prevention and policy, 5*:3. **doi:10.1186/1747-597X-5-3.** Retrieved from http://www.substanceabusepolicy.com/content/5/1/3

[18]   Rodgers, J. (2000). Cognitive performance among recreational users of "ecstasy". *Psychopharmacology, 151*, 19-24.

[19]   Scarpitti, L. F. R., & Datesman, S. K. (1980). *Drug and the Youth Culture*. London: Sage Publication.

[20]   Sdorov, L. M. (1993). *Psychology* (2nd ed.). Brown and Benchmark Publishers.

[21]   Tebeny. I. P., & Sergon, A. (n.d.) *Identification of drugs and their Effects.* Anti-narcotics. J.K.

[22]   Wessels. B. L. (2002). *An exploration of Drug Careers Following Residential Rehabilitation.* Unpublished Thesis. Rand Afrikaans University.