

## **NON-MEDICAL USE OF PHARMACEUTICAL DRUGS AND MOTIVATION FOR CHANGE AMONG STREET YOUTH IN KANO, NIGERIA**

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### **ABSTRACT**

Non-medical use of pharmaceutical drugs among the young Nigerian population is an increasing public health concern. There is a dire need for a robust understanding of the problem as well as factors affecting behaviour change. This study investigated factors influencing non-medical use of pharmaceutical drugs, consequences, and motivation to stop use among street youth in Kano, Nigeria. Twenty-nine street youth selected through the snowballing sampling technique were involved in focus group discussions. Participants aged between 18 and 29 years. Sensation seeking, mood-altering, confidence, and energy boost were upheld as the major reasons for drug use; while poor health outcomes, financial problems, and interpersonal dysfunction were the main consequences discussed by the focus group. Many of the participants indicated the intention to stop drug use but expressed concern about difficulties in accessing treatment. Preventive and psycho-social treatment measures for non-medical use of pharmaceutical drugs targeting this group should be made accessible and affordable.

**Keywords:** motivation for change, non-medical use, pharmaceutical drugs, street youth

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### **INTRODUCTION**

The problem of non-medical use of pharmaceutical drugs has become a prevailing phenomenon in contemporary society, and more disturbing is the rate of

involvement of the young population in this damaging behaviour which poses a great threat to the entire society. This is because of the diverse psychological and social adverse effects and consequences linked to this phenomenon.

It has been asserted that youth in Africa, use different kinds of psychotropic substances (UNODC, 2013). The West Africa Commission on Drugs (2014) affirmed that Nigeria is one of the countries that are mostly affected by the problem of consumption of and dependence on drugs. From the observation of Usman (2015), the rate of drug dependence is increasing among Nigerian youth because unlike in the past when the nation was only a route of drug-trafficking, drugs are now being produced and made available for consumption.

There is a changing pattern of drug use in favour of pharmaceutical drugs such as codeine, tramadol, and benzodiazepines among Nigerian youth (Ikoh, Smah, Okwanya, Clement & Aposhi, 2019; Nwoga, et al., 2019). According to United Nations Office on Drugs and Crime (UNODC, 2018), non-medical use of prescription opioids such as tramadol and codeine-containing cough syrup is the second most commonly used drug after cannabis among individuals aged between 15 and 64 years in Nigeria. Previous studies have also established the non-medical use of various pharmaceutical drugs among young Nigerians, especially the student population. For instance, in a study conducted by Onyecho et al., (2015), tramadol, rohypnol, diazepam, and codeine emerged among the top ten drugs being used by young Nigerians. Nwoga et al. (2019) also reported codeine-containing cough syrup and tramadol among the top five abused drugs by young persons in Nigeria. The high rate of non-medical use of pharmaceutical drugs in Kano was highlighted in the UNODC (2018) report which showed that the overall prevalence of drug use in Kano was high (16 – 20%) compared with many other states.

Regardless of the kind of drug or why it is used, many grave consequences are undoubtedly associated with drug use. For instance, drug abuse constitutes one of the most outstanding socio-psychological hazards that can easily wreck one's personal, family and social life (Masah et al., 2015). A person using drugs faces several consequences like health challenges, reduced productivity, and problems in interpersonal relationships, accidents and sometimes death among other consequences. Family members are distressed by different kinds of problems the user manifests, and are burdened by having to care for the person. Drug use by a family member may lead to family dysfunction and disintegration. Akanbi and Ajiboye (2014) affirmed that drug use is associated with family breakdowns; violence and destruction; child abuse; sexual abuse; wife abuse; disrespect and breakdown of law and order in families and society.

In a similar vein, the community and nation are troubled by the problem of drug use. Criminal acts and violence, vandalism, theft and robbery, killings and unleashing of terror are often perpetrated by young drug-abusing individuals (Ayodele, Adeleke & Gandonu, 2018; Essien, Inyang, James & Emeh, 2016; Odok & Ojedokun, 2017). Felson and Staff (2017) further posited that a significant number of deaths from accidents and violent crimes are linked with activities of persons under the influence of drugs.

Evidence from a review of previous findings shows an increasing number of young people engaging in drug use, particularly non-medical use of pharmaceutical drugs. The phenomenon, if not properly addressed, leads to serious cases of substance use disorders. Non-medical

use of pharmaceutical drugs (especially opioids) is known to cause the greatest negative health impact (UNODC, 2017). Furthermore, numerous psycho-social problems and drug-induced accident and mortality among young people are also accounted for by drug use. Concerning the aforementioned, there is a need for continuous research to develop and deliver evidence-based and timely intervention targeting different groups of persons with drug use problems. This study, therefore, investigated factors influencing non-medical use of pharmaceutical drugs, consequences, and motivation to stop use among street youths in Kano, Nigeria.

### 1.1 Objectives

The study was guided by the following specific objectives:

- To explore factors influencing the non-medical use of pharmaceutical drugs among street youth in Kano, Nigeria.
- To investigate the consequences of non-medical use of pharmaceutical drugs among street youth in Kano, Nigeria.
- To investigate if the participants are motivated to stop their drug use behaviour.

## METHOD

### Design

This study was qualitative utilising focus group discussions to explore factors influencing non-medical use of pharmaceutical drugs, consequences, and motivation to change among street youths in Kano, Nigeria. This design was employed because it focuses on an in-depth

exploration of the variables of concern as peculiar to the study participants. For the aim of this study, this design allows for a deep understanding of participants' opinions, thoughts, and feelings which are considered useful in making appropriate recommendations for designing intervention programme specifically targeting the needs of the population of the study.

### Setting

The study location was Kano metropolis, the capital of Kano State, Nigeria. Kano is the commercial nerve centre of Northern Nigeria and is the second-largest city in Nigeria. Kano metropolis covers eight local government areas including Kano Municipal, Fagge, Dala, Gwale, Tarauni, Nasarawa, Ungogo, and Kumbotso. The study was conducted among street youths i.e. individuals that are not receiving any form of formal education but rather involved with street activities like hawking or unskilled vocation, or not engaged in any gainful activity or vocation located in Gwale and Ungogo Local Government Areas of Kano city.

### Participants

The population for the qualitative phase of the study comprised of 29 (73.3% males) drug-using individuals whose ages ranged from 18 to 29 years. To enhance participation in the discussions, and in line with the study inclusion criteria, the participants were similar in certain demographic characteristics particularly in terms of educational qualification (none of the participants completed secondary school), living situation (79.3% of the participants indicated that they didn't live in a regular home setting with their family members, which was one of the criteria that made them

street youth), finally in terms of occupation and source of income, only 8 (27.5%) of the participants indicated they had an occupation and stable source of income. Furthermore, in terms of drug use profile, all the participants were poly-drug users. Four focus group discussions (FGD) were conducted among street youths using drugs. Two sets of the FGDs involved only male participants, while one involved only females, and the remaining one comprised of mixed genders. FGD 1 comprised of 6 male participants whose ages ranged from 21 to 24 years. The second FGD comprised of 10 male participants whose ages ranged from 23 to 29 years. The third FGD comprised of 5 females whose ages ranged between 22 and 25 years. FGD 4 comprised of 5 males and 3 females, whose ages ranged between 18 and 23 years. It is important to note that only a few (29) participants were involved in this study because many persons that meet the study inclusion criteria declined participation when contacted because they were afraid of arrest by law enforcement agents.

### Sampling

Sampling was also done in two stages. Gwale and Ungogo local government areas (LGAs) were randomly selected through balloting from the eight LGAs that made up Kano metropolis. Participants for the focus group discussions (FGD) were thereafter selected through snowballing sampling techniques from different locations (joints, football pitch, and shops) within Gwale and Ungogo local government of Kano city. The first

participant that was recruited was identified at the drug unit of Kano State Hisbah Board<sup>1</sup>, and after voluntarily consented to participate in the study, he assisted the researchers in recruiting his fellow drug users that met the study inclusion criteria.

### Instrument

Tools for data collection during the focus group discussion are a semi-structured 8-item FGD question guide, tape recorder, paper, and pen. The FGD question guide was translated into Hausa language and validated by experts in the faculty of Education, Bayero University Kano.

### Procedure

Individuals who consented voluntarily to participate in the study were asked to complete the research questionnaire for the cross-sectional survey, and those involved in qualitative study also consented voluntarily to participate in focus group discussions and in-depth interviews. Individuals who voluntarily consented to participate in the study were involved in the discussions. FGDs were conducted using a semi-structured guide. Demographic information of the participants was collected and open-ended questions were used. Discussions ranged between 42–90 minutes in length were conducted at the conference room of Kano Hisbah Command Board. The discussions were conducted in Hausa language, translated by native Hausa speakers who have a university education and were fluent in English language speaking, and transcribed verbatim. The anonymity of participants was

<sup>1</sup> The Kano Hisbah Board was established by the state government with the institutionalization of formerly local and privately maintained *hisbah* security units. The board supervises that Islamic security unit enforcing what is right and forbidding what is wrong on every Muslim.

ensured by identifying each participant by special code name.

**RESULTS**

**Data Analysis**

The qualitative data were subjected to analyses using the Atlas® Qualitative Statistical Software.

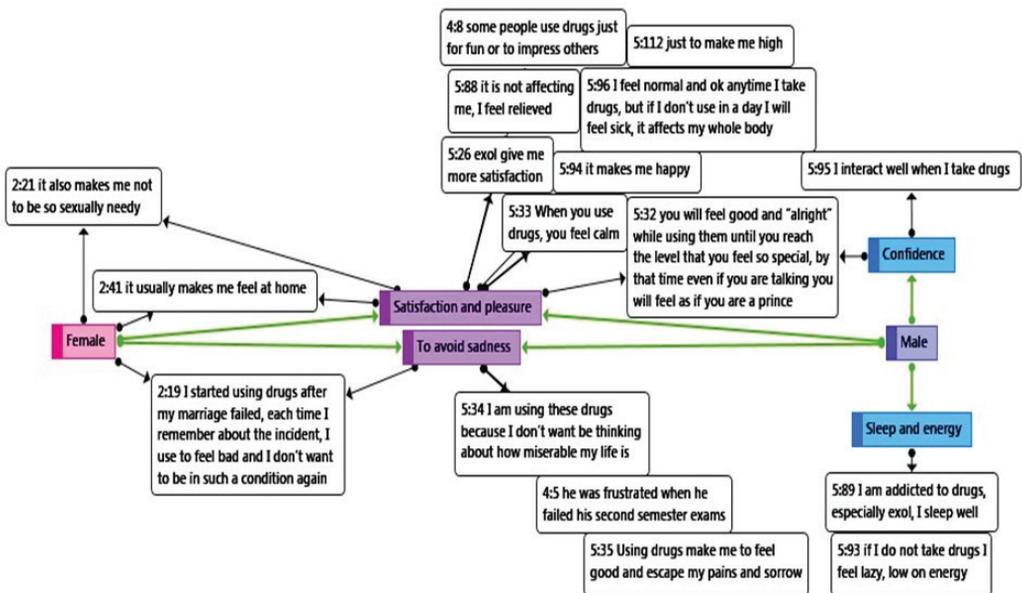
**Ethical Consideration**

Ethical approval was obtained from the Bayero University Kano (BUK) Committee, while approval was also gotten from Kano State Ministry of Education to conduct the study. The purpose and modality of the study were discussed with potential participants. A detailed statement of informed consent that contained the purpose, procedures, potential risk(s) (if any) and benefits of participating in the study was also explained to the participants. Individuals who consented voluntarily to participate in the study were involved as participants in the focus group discussions.

The report of the focus group discussions as obtainable from network analysis conducted with the use of Atlas software revealed the reasons why the participants engaged in non-medical use of pharmaceutical drugs and the consequences that follow, and intention to stop the use.

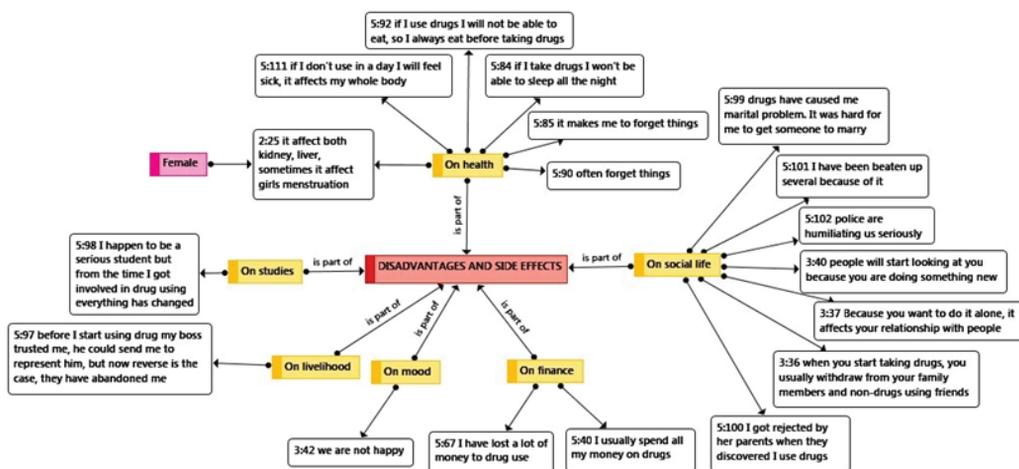
The results in Figure 1 showed the reasons for the non-medical use of pharmaceutical drugs among street youths in Kano, Nigeria. According to the participants, pharmaceutical drugs were being misused to derive several effects including satisfaction and pleasure, to avoid sadness, to gain confidence and to get sleep and energy. While the males use drugs to derive all the aforementioned effects, the females majorly use pharmaceuticals to derive satisfaction and pleasure and avoid sadness. Of all the listed reasons for drug non-medical use of pharmaceutical drugs

**Objective 1. Reasons for non-medical use of pharmaceutical drugs**



**Figure 1.** Reasons for non-medical use of pharmaceutical drugs among youths in Kano

## Objective 2. Consequences of non-medical use of pharmaceutical drugs



**Figure 2.** Consequences of non-medical use of pharmaceutical drugs

among the participants, to derive satisfaction and pleasure were more prominent, having 8 quotations.

The results in Figure 2 revealed the disadvantages and side effects associated with the non-medical use of pharmaceutical drugs as reported by the participants. Both males and females identified drugs as a major contributor to physical and mental ill-health. The findings also showed that disadvantaged and poor functioning in terms of finance, mood, social life, livelihood, and studies were attributed to non-medical use of pharmaceutical drugs among the respondents. The female participants emphasised the adverse effect of drug use on physical health conditions such as deterioration of body organs including the kidney, liver and sometimes disruption of the menstrual cycle and flow. Issues of withdrawal syndrome resulting from dependent use of pharmaceutical and other drugs also emerged prominently from the discussions. Also, participants expressed that in some instances, drug use leads to loss of appetite, sleep, and memory.

The results in Figure 3 showed the intention of the youths involved in the non-medical use of pharmaceutical drugs to stop using the drugs. The responses to this question were contradictory. While a few of the drug users, especially those who personally decided to start using, did not want to stop using drugs, many users intended to stop using drugs. They prayed and believed that one day, they would stop using drugs. The reason for intending to stop included the fact that a lot of money had gone into drugs. The females were beginning to realise that the amount spent on drugs would be more useful especially in caring for their children. Also, drug users want to stop because they are unhappy about their situation and desire to be normal and be free.

## DISCUSSION

This study explored factors influencing non-medical use of pharmaceutical drugs, consequences, and motivation to

### Objective 3. Intention to stop non-medical use of pharmaceutical drugs

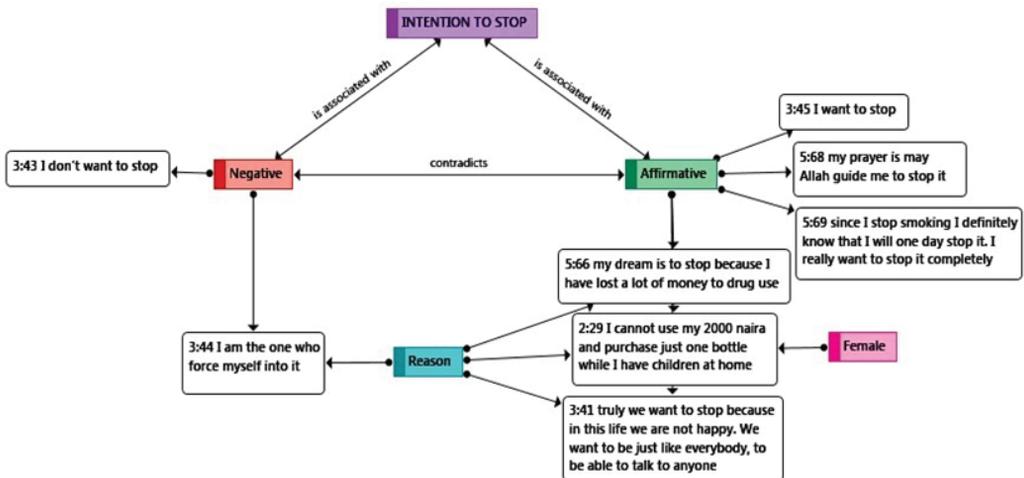


Figure 3. Intention to stop use

stop use among young street individuals in Kano metropolis. Results of the qualitative analysis done revealed that the participants reported involvement in the non-medical use of pharmaceutical drugs for diverse reasons. While there seems to be a consensus among both male and female participants that they use pharmaceutical drugs to derive pleasure and satisfaction as well as to feel good by altering their negative mood, most of the male participants also agreed that the drugs are also used to gain confidence and achieve good sleep and increased energy. These findings are in agreement with previous reports on factors influencing drug abuse among youths. For instance, Adenugba et al. (2018) affirmed that young people get involved in drug use because of their curiosity and inquisitiveness, while Odedokun et al. (2019) in their explanation for youth substance abuse reported parental and peer influence as key predicting factors.

Our finding on the consequences of non-medical use of pharmaceutical drugs

among street youths in Kano as reported by the focus groups discussion participants revealed that many negative experiences and discomfort were attributed to abuse of pharmaceutical drugs. There was a consensus across groups and gender that non-medical use of pharmaceuticals has a serious adverse effect on both physical and mental health. Some of the participants reported that their drug involvement often leads to poor sleep and hygiene, while others indicated that they have experienced memory loss and lack of concentration as a result of their drug use. Also, the participants agreed that the non-medical use of pharmaceutical drugs can lead to serious health conditions such as kidney and liver infections. Masah et al. (2015) had previously asserted that drug use is strongly associated with socio-psychological hazards leading to the destruction of personal, family and social life. In a similar vein, Ayodele et al. (2018) and Felson, et al. (2017) supported the findings of this study in their reports that drug use among youths attracts many

consequences including criminal acts, violence, and deaths.

The adverse effects of drug use on the social life of the participants were expressed in terms of difficulty in holding intimate relationships and failure in courtship and marriage. It was further expressed that drug use often causes strain in interpersonal relationships as a result of withdrawal from previous friends and problems with family members and close relations, rejection by parents and loved ones. Findings from the discussion also indicated that the participants usually have problems with the law enforcement agencies and reported issues of being at the receiving end of derogatory attitude and behavior as well as humiliation from the police.

Financially, there was a consensus among the participants that a lot of financial resources are being expended on drug use. In some instances, apart from spending all they had on drugs, the respondents indicated they go the extra mile like cheating, lying and stealing to raise money to fund their drug use. In this regard, their standard of living is drastically affected as some even lose their source of livelihood because of drug use. While some of the respondents also stated that they could not complete formal education, others reported that they have lost the trust of their superiors and co-workers as a result of their drug use behavior. The participants expressed unhappiness about this situation.

Finally, the findings of this study on respondents' motivation to stop pharmaceutical drug use non-medically showed that most of the participants indicated intention and willingness to stop. Although some of the members of the focus group discussions expressed some level of

pessimism as they believe that it will be difficult for them to stop, the majority of them were optimistic that if assisted especially by the government making treatment facility accessible, they would be able to stop. One of the major reasons why the participants expressed the intention to stop was a result of serious financial implications and loss that they have experienced due to their drug use. It was also found that the negative impact of the drugs on their family relationships and the inability to take responsibility in caring for their children and other loved ones is a major motivating factor, especially for female users to stop. Generally, the respondents felt sober and indicated their unhappiness about their drug use, hence, desire to stop and pick up their lives again and live a free and happy life.

### **Limitation of the Study**

Despite the contributions of this study, it is important to point out some limitations of the study. First, being a qualitative study conducted among a few purposively selected participants, the external validity in terms of the extent to which the findings of the study can be generalized to the population study is limited. In line with the first identified limitation of the study, only a few members (29) of the study population were sampled for this study. The inability to sample a larger participant was as a result of the high level of a crackdown on drug users in Kano by law enforcement agents following the BBC report of the high prevalence of pharmaceutical drug use in Kano shortly before the commencement of data collection for this study. The fear of arrest and prosecution made it difficult to access persons that meet the inclusion criteria for this study. Third, the absolute validity of the

responses of participants during discussions could not be ascertained due to the perceived influence of the presence of the researchers. This is considered a threat to the internal validity of the study. Finally, participants were not objectively screened for any co-occurring mental health condition which could influence the mental status of the participants during data collection. Nevertheless, the data collected from the discussions are very valuable as they reflect the opinion, feeling, and experiences of the participants about the variables of concern. Also, making participation in the study voluntary and a conducive environment guarantees the quality of the data collected.

### CONCLUSION

The increasing rate of non-medical use of pharmaceutical drugs and associated consequences is considered a major public health challenge. Many factors contribute to the involvement of youth in drug use. However, certain factors are peculiar to different groups of people considering unique attributes that define groups. As such, there is a pressing need for understanding specific factors that influence drug use among the different populations to ensure that evidence-based and appropriate intervention is designed and delivered to them. In this study, factors influencing the non-medical use of pharmaceutical drugs among street youth in Kano, Nigeria were revealed from the results of focus group discussions conducted. Also, different forms of negative consequences being experienced as a result of the non-medical use of pharmaceutical drugs by street youths emerged from the findings of this study. Finally, our

findings showed that many of the street youths involved in the non-medical use of pharmaceutical drugs have the intention to stop and are open to behaviour change should they have the opportunity to receive treatment.

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