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# Youth and Drugs: Problems, Consequences and Preventives Measures

**Ibrahim Umar Ibrahim<sup>1\*</sup>**

<sup>1</sup>*Ahmadu Bello University, Zaria, Nigeria.*

## **Author's contribution**

*The sole author designed, analyzed, interpreted and prepared the manuscript.*

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## **ABSTRACT**

**Aim:** This article reviews the effects and consequences of improper drugs use among youth. We tried to broaden our understanding on its effects, causes, and also to learn new preventive measures and principles that can be used to cure or mitigate the effects of such habits on people, and also to have comprehensive literature on the problem.

**Methodology:** This paper focuses on the mains causes of the problems, i.e. drugs abused or substance abuse, among youth, its symptoms and sign, and consequences especially on health. And also preventives measures or principles that are prominent authors cited in their articles or reports which are believed to be effective.

*Keywords: Drugs abuse; substance abuse; consequences; inhalants; marijuana; narcotics.*

## **1. INTRODUCTION**

Drugs abuse or substance abuse has been a serious issue that surrounds youth life as most of the youth get exposed to this habit with or without knowing/noticing the adverse negative

consequences it has on their future. Most of them regret the life they found themselves in, and are willing to change for good but lack of awareness or help from those that supposed to put them on proper line of recovery makes life more difficult and miserable to them, this types of

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\*Corresponding author: Email: [ibrahimu334@gmail.com](mailto:ibrahimu334@gmail.com) , [ibrahimu334@yahoo.com](mailto:ibrahimu334@yahoo.com);

issues were normally or frequently reported from developing countries.

Drugs or substance abuse has been in existence for a long time and is widely regarded by both government, communities NGOs as a societal issue that needs proper concentrations from both parties that involve especially parents, in trying to explain the issue. A number of researchers have been made in order to identify both the causes, effect/consequences of this harmful acts, and their finding was published by numerous authors. Desai [1] reported that drugs or substance abuse lead to a psychological problems such as depression (state of being in low spirit), anxiety, dementia (loss of memory), Hallucination (hearing or seeing an image when this is not real), moodiness and aggressiveness which can lead to the degeneration of the individual.

This articles review the problem and cite some of the preventive measures and principles that's when dully followed will result in both reducing the number of those that will be effected and also, retrieving of those that have been already in the dilemma for a long time.

## 2. LITERATURE REVIEW

### 2.1 Drug Abuse

Drugs abuse is defined as a pattern of recurrent use of drugs that leads to damaging consequences. These damaging consequences may involve failure to meet one's major role responsibilities [2].

#### 2.1.1 Why do people take drugs?

Reasons behind this habit of improper use of drugs and other substances varied, as different people take such drugs in such of particular satisfactions which the abuser believe to have when he used those drugs or substances. Some take drugs in order to reduced stress, some due to their work conditions, while some used such substances to have a relieve from frustrations, anger, depressions etc. and it's in the process of doing that they become addicted to such substance, and their life affected badly. But In general, we can say that people begin taking drugs for a variety of reasons which include the like of [3-4]:

- 1- *To feel good.*  
Most abused drugs produce intense feelings of joy and pleasure. This initial sensation of euphoria is followed by other

effects, which differ with the type of drug used. For example, with stimulants such as cocaine, the "high" is followed by feelings of power, self-confidence, and increased energy. In contrast, the euphoria caused by opiates substances such as heroin is followed by feelings of relaxation and satisfaction.

- 2- *To feel better.*  
Some people who suffer from social anxiety, stress-related disorders, and depression begin abusing drugs in an attempt to lessen feelings of distress. Stress plays a major role in beginning drug use, continuing drug abuse, to the extents were the abuser become addicted
- 3- *To do better.*  
Some people feel pressure when chemically enhance or improve their cognitive or athletic performance, (which can play a role in) therefore from initial experimentation, they proceed and continued the use of such drugs, e.g. prescription stimulants or anabolic/androgenic steroids etc. and thereby become addicted to them.
- 4- *Curiosity or because others are doing it.*  
In a report entitle "*Drugs, Brains, and Behavior*", *The Science of Addiction* by National Institute on Drug Abuse [5], states that adolescents are particularly vulnerable to drug abuse because of the strong influence of peer pressure. While teens are more likely than adults to engage in such risky or daring behavior to impress their friends and express their independence from parental and social rules.

### 2.2 Categories/Classifications of Drugs Abused

As reasons for drugs abused varied, types of drugs abuse also varied, In Nigeria, the most common types of abused drugs according to Centers for Disease Control and Prevention [6] as cited by Haladu [13] are categorized as follows:-

#### 2.2.1 Stimulants

These are substances that directly act and stimulate the central nervous system. Users at the initial stage experience pleasant effects such as energy increase. The major source of these comes from caffeine substance.

## 2.2.2 Hallucinogens

These are drugs that alter the sensory processing unit in the brain. Thus, producing distorted perception, feeling of anxiety and euphoria, sadness and inner joy, they normally come from marijuana.

## 2.2.3 Narcotics

These drugs relieve pain, induce sleep and they are addictive. They are found in heroin, codeine, opium etc.

## 2.2.4 Sedatives

These drugs are among the most widely used and abused. This is largely due to the belief that they relieve stress and anxiety, and some of them induce sleep, ease tension, cause relaxation or help users to forget their problems. They are sourced from valium, alcohol, promethazine, chloroform.

## 2.2.5 Miscellaneous

This is a group of volatile solvents or inhalants that provide euphoria, emotional disinhibition and perpetual distortion of thought to the user. The main sources are glues, spot removers, tube repair, perfumes, chemicals etc.

## 2.2.6 Tranquilizers

They are believed to produce calmness without bringing drowsiness, they are chiefly derived from Librium, Valium etc. [7].

## 2.3 Most Abused Substance

### 2.3.1 Marijuana

The use of marijuana has been increasing at a much faster rate than the use of other drugs, particularly among the youngest teens in the world, and its directly accounts for much of the rise in overall drug use statistics. In the United States of America, marijuana use among 8th-grade students, and its nearly tripled from 6.2 percent in 1991 to 18.3 percent in 1996 and levelled off at 17.7 percent in 1997 [8].

### 2.3.2 Inhalant

Inhalants are another important class of drugs, second only to marijuana in their lifetime use prevalence rates among adolescents. Inhalants are easily available, inexpensive, and often not

classified as illicit drugs in the minds of children and their parents. Inhalant use is most prevalent among younger children, *national youth anti-drug media campaign reported that* in 1997 data collected in the united states shows that's, 21 percent of 8th graders, 18 percent of 10th graders, and 16 percent of 12th graders said they had bagged, huffed, or sniffed a chemical at least once in their lives. Inhalants are dangerous; even a single episode of inhalant use can cause brain damage and death [9].

## 2.4 The Consequences of Drug Use

The direct physical consequences of using "hard" drugs such as cocaine and heroin are generally well known, at least among the adult population, as a result of the considerable coverage they have received in the popular media. But it was unfortunate how the public is less aware of the dangers of using marijuana and other inhalants substance which they also inflict severe effects. Here we will site the effects, or consequences resulted as a result of using substances like marijuana and inhalants.

### 2.4.1 Marijuana

One of the most serious dangers of using marijuana is that it opens the abusers at higher risk for using more dangerous drugs. However, marijuana use itself has serious immediate and long-term adverse consequences.

Few of the immediate effects of marijuana use include sleepiness, difficulty in keeping track of time, and most important, reduced ability to perform tasks requiring concentration or complex psychomotor skills. These neuro-psychological symptoms severely impair a child performance and activities such as studying, memorizing, driving, and sports.it was also noted that used of marijuana also reduces motivation and activity level, thereby interfering with the development of physical and psychological skills which is very much needed later life [9].

Though longtime effects of using marijuana are not completely understood, there is strong evidence that marijuana can cause serious health problems.

In a report by [9] states that are marijuana smoke contains more than 400 carcinogenic compounds, and a person who smokes five joints per week may be taking in as many cancer-causing chemicals as someone who smokes a full pack of cigarettes every day. Ironically, this

shows that's people mistakenly believe that cigarette smoking is more harmful than using marijuana, which is very much wrong some extent because marijuana users typically smoke less than cigarette smokers but the effects and consequences that small amount will result is huge. In fact, regular marijuana smokers have the same kinds of respiratory problems as cigarette smokers' daily cough and phlegm and more frequent chest colds.

THC (the active ingredient in marijuana) also affects hormonal systems and can impair sexual and reproductive functions [9]. In males, it may delay the onset of puberty and lower the sperm count. In women, it can disrupt the menstrual cycle and inhibit ovulation. Long-term use of marijuana may compromise the immune system [9]. Some people also build tolerance for the drug and may develop a chemical dependency.

Long-term use of marijuana may also cause chronic psychological problems. Some frequent users of marijuana develop problems like "a motivational syndrome" which is characterized by chronic fatigue, a lack of motivation, and not caring what happens to them.

#### 2.4.2 Inhalants

The list of physical consequences of inhalant use is as diverse as the list of inhalants themselves. In general, of the thousand or so chemicals that adolescents have been known to sniff to get high, nearly all were found to cause problems like, brain damage, suffocation, visual hallucinations, and sudden death, even at the first attempt, they inflict or cause problems like the heart palpitations, delirium, difficulty in breathing, which are the few among the popular short time effects of using Inhalants [9].

### 2.5 Signs and Symptoms of Drug Abuse

According to Adolescents Health Information Project AHIP [10,7] in a paper entitled, "Drug abuse among Nigerian adolescents' strategies for counselling" the following are signs and symptoms of drug abuse:

#### 2.5.1 Signs of drug used and drug paraphernalia

- Possession of drug-related paraphernalia such as pipes, rolling paper, small decongestant.
- Possession of drugs, peculiar plants or bolts, seeds of leaves in ashtrays or clothing pockets.

- Odour of drugs, the smell of incense or other cover-up scents.

#### 2.5.2 Identification with drug culture

- Drug-related magazines, slogans on clothing
- Hostility in discussing drugs

#### 2.5.3 Signs of physical deterioration

- Memory lapses, short attention span, difficulty in concentration.
- Poor physical coordination, slurred or incoherent speech; unhealthy appearance, indifference to hygiene and grooming
- Bloodshot eyes dilated pupils.

#### 2.5.4 Changes in behavior

- Distinct downward performance in school place of work.
- Increased absenteeism or tardiness.
- Chronic dishonesty, lying; cheating and stealing.
- Trouble with the police and other law enforcement agencies
- Change of friends, evasiveness in talking about new ones.
- Increasing and inappropriate anger, hostility, irritability, sectraveness etc.
- Reduce motivation, energy, self-discipline, self-esteem etc. [7]

In a report title *Adolescent Health highlight: Used of illicit Drugs*, [11] revealed sign like mood swing, weight loss, and a drop in grades by students, possession of drug paraphernalia, increase in problematic behaviours' are also a sign of abuses. While some unique sign is experienced by the use of some specific substances or drugs, these includes for examples, sign of marijuana use include bloodshot eyes and appearing dizzy or uncoordinated, while sign of Inhalants use are aggressive behavior or outburst, nausea, poor coordination, unintelligent speech and muscles weakness [12].

Haladu [13] gave the following as the main causes'

- i. Experimental Curiosity: Curiosity to experiment the unknown facts about drugs thus motivates adolescents to 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.
- ii. 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.
  - iii. 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 increase drug abuse.
  - iv. 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 to drug abuse for temporarily removing the tension and problems arising from it.
  - v. 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 long hours.
  - vi. Availability of the Drugs: In many countries, drugs have dropped in prices as supplies have increased.
  - vii. 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 [10].

## 2.6 Drugs Dependence or Addictions among Young

Substance or drugs abuse is a pattern of recurrent use substance or drugs that lead to damaging consequences. These damaging consequences may involve failure to meet one's major role responsibilities (e.g., a student, worker, or parent), or putting oneself in situations where substance use become physically dangerous (e.g., mixing driving and substance use), or encountering repeated problems with the law arising from substance use (e.g., multiple arrests for substance-related behavior), or having recurring social or interpersonal problems because of substance use (e.g., repeatedly getting into fights when drinking).

Drugs or substance dependence or addictions can also be defined as a maladaptive pattern of use that results in significant impairment or distress, as shown by the following features that are used to occur;

1. Tolerance for the substance: Tolerance of the substances or drugs can be shown by either of the following
  - The need for increased amounts of the substance to achieve the desired effect or intoxication, or
  - Marked reduction in the effects of continuing to ingest the same amounts.
2. Withdrawal symptoms, as shown by either
  - The withdrawal syndrome that is considered characteristic for the substance or
  - The taking of the same substance (or a closely related substance, as when methadone is substituted for heroin) to relieve or to prevent withdrawal symptoms.
3. Taking larger amounts of the substance or for longer periods of time than the individual intended (e.g., a person had desired to take only one drink, but after taking the first, continues drinking until severely intoxicated).
4. Persistent desire to cut down or control intake of substance or lack of success in trying to exercise self-control.

5. Spending a good deal of time in activities directed toward obtaining the substance (e.g., visiting several physicians to obtain prescriptions or engaging in theft), in actually ingesting the substance, or in recovering from its use. In severe cases, the individual's daily life revolves around substance use.

6. The individual has reduced or given up important social, occupational, or recreational activities due to substance use (e.g., the person withdraws from family events in order to indulge in drug use).

7. Substance use is continued despite evidence of persistent or recurrent psychological or physical problems either caused or exacerbated by its use (e.g., repeated arrests for driving while intoxicated) and the likes.

## 2.7 The Effects of Drug Abuse

Several authors [14,7] identified numerous negative effects of drug abuse on the body chemistry as follows:

### 2.7.1 Alcohol-related problems include

- Physical problems e.g. liver cirrhosis, pancreatic, peptic ulcer, tuberculosis, hypertension, the neurological disorder.
- Mental retardation of the fetus in the womb, growth, deficiency, delayed motor development.
- Craniofacial abnormalities, limbs abnormalities and cardiac deficits.
- Psychiatric e.g. pathological drunkenness, suicidal behavior
- Socially-broken homes, increased crime rate, sexual offences, homicide and sexually transmitted diseases.

### 2.7.2 Tobacco

Causes stimulation of heart and narrowing of blood vessels, producing hypertension, headache, loss of appetite, nausea and delayed growth of the fetus. It also aggravates or causes sinusitis, bronchitis, cancer, strokes, and heart attack.

### 2.7.3 Stimulants

Lethargy, irritability, exaggerated self-confidence, damage nose linings, sleeplessness, and psychiatric complications.

### 2.7.4 Inhalants

Causes anemia, damage kidney and stomach bleeding. 5. Narcotics: Causes poor perception,

constipation, cough, suppression, vomiting, drowsiness and sleep, unconsciousness and death.

## 2.8 Protecting Adolescents from Substance Abuse

Researchers have identified several strategies that are can be used to mitigate or controls substance abuse among youths, these factors are regarded as protective factors that's when dully followed can bring a positive change to the situations.

Mba [14] explain that, one of the conditions that make it more likely that adolescent can attain a state of substance-free is proper and effective connections with his parents or guardians, presence of parent in a home at key time during the day, and restricting the child from gaining access to illegal substances in the home, and also monitoring the were about of their children with or without their consent.

Also, strong connection to schools and a deep religious commitment also can help adolescents to avoid substance use [11].

### 2.8.1 Risk factors, protectives factors and preventions principles

In a report made by National Institute on drug abuse of the United State of America, entitled "preventing Drugs Abuse among Children and adolescents" [15] explained that's, risks factors are any factors associated with greater potential for drug abuse while those associated with reducing the potential for abuse are called "protective" factors.

### 2.8.2 Principles for proper prevention and cure

#### Principle 1

Hawkins et al. [16] state that's any prevention programs should enhance protective factors and reverse or reduce risk factors, this was taken as the first principle by many authors, and reported in many publications, like [15] and explain by a number of authors such as;

- Wills et al. [17] says that the risk of becoming a drug abuser involves a number of relationships that exist among the types of risk factors (e.g., deviant attitudes and behaviors) and protective factors (e.g., parental support).

- Kumpfer et al. [18] say that potential impact of specific risk and protective factors changes with age. For example, risk factors within the family have the greater impact on a younger child, while the association with drug-abusing peers and groups may be a more significant risk factor for an adolescent.
- Early intervention with risk factors (e.g., aggressive behavior and poor self-control) often has a greater impact than later intervention by changing a child's life path toward positive behaviors [19].
- While risk and protective factors can affect people of all groups, these factors can have a different effect depending on a person's age, gender, ethnicity, culture, and environment as explains by several authors [2,20].

#### Principle 2

Prevention programs should address all forms of drug abuse, alone or in combination, including the underage use of legal drugs and other substances (e.g., tobacco or alcohol); the use of illegal drugs (e.g., marijuana or heroin); and the inappropriate use of legally obtained substances (e.g., inhalants), prescription medications, or over-the-counter drugs [21].

#### Principle 3

Prevention programs should address the type of drug abuse problem in the local community, target modifiable risk factors, and strengthen identified protective factors [16].

#### Principle 4

Prevention programs should be tailored to address risks specific to population or audience characteristics, such as age, gender, and ethnicity, to improve program effectiveness [22].

#### Principle 5

Family-based prevention programs should enhance family bonding and relationships and include parenting skills; practice in developing, discussing, and enforcing family policies on substance abuse; and training in drug education and information [23].

Family bonding is the bedrock of the relationship between parents and children. Bonding can be strengthened through skills training on parent

supportiveness of children, parent-child communication, and parental involvement [24].

- Parental monitoring and supervision are critical for drug abuse prevention. These skills can be enhanced with training on rule-setting; techniques for monitoring activities; praise for appropriate behavior; and moderate, consistent discipline that enforces defined family rules [25]
- Drug education and information for parents or caregivers reinforce what children are learning about the harmful effects of drugs and opens opportunities for family discussions about the abuse of legal and illegal substances [26]
- Brief, family-focused interventions for the general population can positively change specific parenting behavior that can reduce later risks of drug abuse [27]

#### Principle 6

Prevention programs can be designed to intervene as early as pre-school to address risk factors for drug abuse, such as aggressive behavior, poor social skills, and academic difficulties [28,29].

#### Principle 7

Prevention programs for elementary school children should target improving academic and social-emotional learning to address risk factors for drug abuse, such as early aggression, academic failure, and school dropout. Education should focus on the following skills [19] Conduct Problems Prevention Work [30] • self-control; • emotional awareness; • communication; • social problem-solving; and • academic support, especially in reading.

#### Principle 8

Prevention programs for middle or junior high and high school students should increase academic and social competence with the following skills [31,32] • study habits and academic support; • communication; • peer relationships; • self-efficacy and assertiveness; • drug resistance skills; • reinforcement of anti-drug attitudes; and • strengthening of personal commitments against drug abuse.

#### Principle 9

Prevention programs aimed at general populations at key transition points, such as the

transition to middle school, can produce beneficial effects even among high-risk families and children. Such interventions do not single out risk populations and, therefore, reduce labelling and promote bonding to school and community [31,32,30].

#### Principle 10

Community prevention programs that combine two or more effective programs, such as family-based and school-based programs, can be more effective than a single program alone [33].

#### Principle 11

Community prevention programs reaching populations in multiple settings—for example, schools, clubs, faith-based organizations, and the media—are most effective when they present consistent, community-wide messages in each setting [34].

#### Prevention Program Delivery

#### Principle 12

When communities adapt programs to match their needs, community norms, or differing cultural requirements, they should retain core elements of the original research-based intervention [27], which include:

- Structure (how the program is organized and constructed);
- Content (the information, skills, and strategies of the program); and
- Delivery (how the program is adapted, implemented, and evaluated).

#### Principle 13

Prevention programs should be long-term with repeated interventions (i.e., booster programs) to reinforce the original prevention goals. Research shows that the benefits from middle school prevention programs diminish without follow-up programs in high school [32].

#### Principle 14

Prevention programs should include teacher training on good classroom management practices, such as rewarding appropriate student behavior. Such techniques help to foster students' positive behavior, achievement, academic motivation, and school bonding [19].

#### Principle 15

Prevention programs are most effective when they employ interactive techniques, such as peer discussion groups and parent role-playing, that allow for active involvement in learning about drug abuse and reinforcing skills [31].

#### Principle 16

Research-based prevention programs can be cost-effective. Similar to earlier research, recent research shows that for each dollar invested in prevention, a savings of up to \$10 in treatment for alcohol or other substance abuse can be seen [35-37].

### 3. CONCLUSION

In this article, an effort has been made to address the problems of substance or drugs abuse among the youth specifically in order to have a conceptual understanding of the difficulties. The main issue related to the causes, consequences, types of substances or drugs abused were discussed, so also the preventive measures and principles were also discussed and examined, it is my hope that this article will be a reference model in the future studies related to the substance abuse or drugs abuse.

### COMPETING INTERESTS

Author has declared that no competing interests exist.

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