Teenagers Use of Hard Drugs and Mental Health Problems in Bayelsa State, a Case Study of **Okaka Correctional Service Centre**

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ABSTRACT

This study examined the use of hard drugs and mental problems among teenagers in Yenagoa, Bayelsa state: A survey of the Nigerian Correctional Service, Okaka. The study was guided by four objectives and four corresponding research questions. The study adopted Durkheim's theory. The research design adopted for this study was a descriptive survey. The population of the study consists of 350 Nigerian Prison personnel and 250 inmates from OkakaYenagoa Correctional Centre making a total of 550. (Nigerian Prison Service Bulletin, 2021). A sample size of two hundred and thirty-two (232) representing 38% of the population was selected through a simple random sampling technique. The instrument used for this study was a researcher-designed structure questionnaire. Percentages were used to describe the demographic characteristics of the respondents and research questions. Findings revealed that there was a great awareness of the ills of using hard drugs and some typology of hard drugs. Therefore, the following recommendations were made; the government at all levels should effectively enforce rules and regulations guiding the consumption of hard drugs in Bayelsa state. The family institution should be properly planned and organized to operate at a measurable level of socio-economic status where the basic needs of man can be provided by parents to avoid addictive lifestyle.

KEYWORDS: Teenagers, Lifestyle, Addiction, Drug Abuse, Hard Drugs

INTRODUCTION

Drug abuse is known clinically as substance use disorder; ••• the commission of a crime. Mental health is a person whose drug abuse or addiction is caused by the habitual taking of addictive substances. Drugs include alcohol, marijuana, hallucinogens, and opioids. Substance use disorder is a disease, causing people to compulsively use drugs despite consequences.

For example, the injection of drugs directly into the bloodstream has an immediate impact, while ingestion has a delayed effect. Unfortunately, all misused of drugs had served consequential effect on the brain. They cause large amounts of dopamine, a neurotransmitter that helps regulate our emotions, motivation, and feelings of pleasure, to flood the brain and produce a "feeling of being high." Eventually, drugs can change how the brain works and interfere with a person's ability to make choices, leading to intense cravings and compulsive drug use. Over time, this behavior can turn into substance dependency or drug addiction. (Asuka, 2019)

Drugs are legal when they are taken in proper doses and when they are prescribed by a certified medical practitioner. However, the use of drugs becomes addictive when the consumer takes an excess of it. Some teenagers indulge in the illegal act of selling, buying, possessing, or consuming drugs that are capable of causing mental health and enhance How to cite this paper: Oyeinfie E. Jonjon "Teenagers Use of Hard Drugs and Mental Health Problems in Bayelsa State, a Case Study of Okaka Correctional Service

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status is abnormal as certified by a psychiatrist or physician.

In Yenagoa, several young men and women are roaming the streets, market squares, and in particular, Okaka correctional center. In this scenario pottery an ugly and embarrassing sight for a state that 'prides itself as the glory of all lands. It's finding solutions to this impelled and worrisome trend, in the midst of the rehabilitation institution, we shall focus on the Okaka correctional service center to bring the menace under control. The is pivotal to understanding the link between the commission of a crime and the use of hard drugs as a result of addiction by teenagers. In this work, the researcher examines the concept, hard drugs, causes, consequences, the role of Nigeria Correctional Service, and suggestions towards tackling the menace.

STATEMENT OF THE PROBLEM

Increasing teenager's involvement in substance use and abuse is a major threat to national development, family stability, and security from which they need to be protected (Antwi, Adjei, Asare&Twene, 2003). Studies by Kypri, Cronin, and Wright (2005), Balogun, (2006), Nanchi, (2007), Melchior, Chastang, Goldberg, and Fombonne (2008), Fareo (2012), and Adigun (2014) on drug abuse and drug effect related studies. So far, no work known to the researcher on

teenagers 'use of hard drugs and mental problems in Bayelsa state, Nigeria has been researching upon.

OBJECTIVES OF THE STUDY

This study focuses on the context of teenagers 'use of hard drugs and mental problems in Okaka correctional Service centre, Yenagoa, Bayelsa state. To achieve this, the following specific objectives were postulated:

- 1. Determine factors responsible for the use of hard drugs by Teenagers in Okaka, Yenagoa, Bayelsa state.
- 2. Determine the extent to which these substances affected teenagers in Yenagoa, Bayelsa State.
- 3. Determine the role to which the Nigerian Correctional Service plays in the reduction of the use of hard drugs in Yenagoa.
- 4. Determine the role of the family and friends in the supply of hard drugs to inmates in the Okakacorrectional service centre.

RESEARCH QUESTIONS

- 1. Why do teenagersuse hard drugs in Yenagoa, Bayelsa State?
- 2. How does the consumption of hard drugs affect teenager's mental health in Okakacorrectional services, Yenagoa, Bayelsa State?
- 3. How has the Okaka correctional center aid in the rising trend of teenagers use of hard drugs and mental health?
- 4. How has family members and friends involved in the supply of hard drugs to inmates in Okaka correctional service?

LITERATURE REVIEW

Hard drug use is a problem in society among teenagers. Teenage hard drug use has declined from the mid-1990s, but other illicit substances, such as amphetamines and 24 hallucinogens, have remained the same, Kelly, Comello&Hunn (2002). The constant interaction with peers exacerbates the easy availability of substances to the teenagers because there are more doors open to where they are able to obtain substances. In 2009, the Substance Abuse and Mental Health Services Administration conducted the National Survey on Drug Use and Health (NSDUH) to analyze the prevalence of substance use among teenagers age 12 to 18. They found out that there was an increase in the number of adolescents using substances since 2002, Office of National Drug Control Policy (2009). There were 21.8 million estimated adolescents age 12 to 18 years who used illicit drugs in prior months before taking the survey, increasing from 20.1 million adolescent users in 2008.3,4 The survey's findings suggested that adolescents' negative attitudes about substances were beginning to change; for example, the negative attitude towards marijuana declined from 9% and 7% between 2008 and 2009. The results of the National Survey on Drug Use and Health suggested that adolescents were being misinformed about substances, which had changed the adolescents' perception of the risk in marijuana use Rockville (2010).

Hard drug use among teenagers has been a scourge to the overall sustainable development of the nation. Hard drug is a serious issue; a global and international issue particularly in developing countries like Nigeria. Hard drug use is also a major public health, social and individual problem and is seen as an aggravating factor for economic crises; hence, for Nigeria's poverty status. While teenagers are supposed to be the major agent of change and development, some of them have been destroyed by hard drug use (rendering them unproductive). Hard drug use has become a global concern in Nigeria because of its effect on teenagers and the nation as a whole. Hard drug use has a negative impact on the educational, social, economic, political and cultural activities of humans across the globe. The overall health of the user is affected negatively and behaviors associated with hard drug use predispose the abuser to crime and contagious diseases including HIV/AIDS (Center for Disease Control, 2000).

Various stakeholders like parents, security experts and the society at large are worried over the prevalence of hard drug use and its causes and consequences on teenagers. Drugs are produced for a variety of different reasons including those associated with ensuring a state of wellbeing, curing illness, and sustaining mental and physical stability. Modern medical substances are commonly known as 'medicine' (many derived from plants), do not constitute any danger. If properly administered, drugs can assist human beings in many positive ways. The term 'drug' refers to "any substance, when taken into a living organism, limits illhealth", however, if drugs are abused, they can become very "destructive to the individual and to society at large". A drug is a chemical modifier of the living tissues that could bring about physiological, sociological and behavioral changes (Nnachi, 2007; Okoye, 2001).

Drugs are substances that, when taken, can limit cognition, perception, mood, behavior and overall body function. It can also produce a change in biological functions through its chemical actions (Balogun, 2006). A drug is used for reasons such as curing or alleviating pain and diagnosing ill-health and is seen as a common process in many communities. Studies by Kypri, Cronin and Wright (2005), and Melchior, Chastang, Goldberg and Fombonne (2008) submitted that across the countries of the world, hard drug use tends to be rampant among youngsters between the ages of 14 and 22.

Falco (2008) stated that the chronic use of hard drugs can cause serious damage, sometimes irreversible physical and social damage (either temporarily or for a long period of time). Internal damage could result as well. To this effect, some of these teenagers, who are still in their growing stage, become insane, socially misfit in school situations and eventually drop out of school as well as becoming ardent criminals in society. The misuse of medication, selfmedication and the use of illegal substances is called hard drug use or drug abuse. Some of these substances in the form of medication give pleasure to the user and some brain nerves become the end-user (which is known as pleasurable pathways). The user at first may enjoy it and will want to experience the sensation again (Seraphim, 2005).

A person who allows himself/herself to be controlled by a psychoactive substance is called a 'drug abuser' (Merck, 2009). A drug abuser brings forth a condition called neurological functions and his/her moods, perception, consciousness, and energy levels change and the drugs can take over his/her normal functioning and well-being (King, 2008). The negligent used of any substance, mostly the ones that have effects on one's consciousness like alcohol, cocaine, codeine, and methamphetamines results in discomfort and malfunction (Merck, 2009).

The following habits were noted by Santrock (2001) and Nyaga (2001) by those who abuse substances - they exhibit

watering eyes and nose, become abnormally talkative or unusually quiet, experience unpredictable tempers, their concentration lapses and they have a loss of interest in education, become mentally derail(mental disorder). Some become careless, neglect their personal hygiene, become generally irresponsible, are highly irritable or hostile to close friends, and wear dirty and tattered clothes (or they do not change their clothes for many days). Santrock (2001) and Nyaga (2001) further stated that such behaviours present many challenges to our society at large.

In the early 1960s, after independence, Nigeria noticed rampant cases of hard drug use (Okon, 2002). During that period, the number of drugs that were mostly abused was limited to tobacco, kolanut and alcohol. These days, many young ones now resort to everything including tobacco, alcohol and illicit drugs; the products that are most available to them (Okon, 2002). This situation, among others, has resulted in the creation of the National Drug Law Enforcement Agency (NDLEA) which was established by Decree No. 48 in 1989 to handle issues relating to the abuse and trafficking of narcotic drugs and other psychotropic substances, other than food which by its chemical nature, affects the structure and function of living organisms (Fareo, 2012).

Many justifications have been attributed to the use of hard drugs, especially among teenagers. In line with this, Olatude (2000) and Akunyili (2003) in their views stated that people use drugs for a variety of reasons which includes:

- 1. Their need to belong to a social group or class;
- 2. Pressure from friends and peers;
- 3. For self-medication;
- 4. Because of parental deprivation at various levels; Develo
- 5. For pleasure;
- 6. To overcome illness;
- 7. To gain confidence;
- 8. To overcome shyness;
- 9. To be able to facilitate communication;
- 10. To overcome many other social problems; and
- 11. To induce themselves to work above their physical capacity.

Moreover, many people interchangeably use the concepts of 'drugs', 'drug misuse', and 'drug abuse', but there are definite differences between the concepts. Drug misuse is to use a drug for a purpose for which it should not be used for. The misuse of drugs means following the medical instructions but the person may not necessarily be looking to 'get high' from their use. While drug abuse referred to those who do not have a medical prescription for what they are taking in. Not only do they use it in a way other than it is prescribed but they also use it to experience the feelings associated with the drug. Euphoria, relaxation, the general feeling of 'getting high' is always associated with drug abuse. The abuse of drugs always results in unavoidable side effects, including dependency and addiction.

Nigeria introduced its drug control effort in 1985 when a dangerous drug ordinance was enacted to control trafficking and abuse (Johnson, 2002). By 1994, another landmark effort was made when the Federal Military Government

promulgated the special tribunal (miscellaneous offenses) Decree No. 20 of 1984 to stop drug trafficking within Nigeria shores. This is because a drug menace continued to rise in profile (Johnson, 2002). According to NAFDAC (2000), the following drugs were used and misused in Nigeria. They are sedatives, miscellaneous and tranquilizers.

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

Teenage use of the hard drug is the degree to which a psychoactive drug is harmful to a consumer and is measured in many ways, such as addictiveness and the potential for physical harm. It usually refers to drugs that are seen to be more dangerous and more likely to cause dependency such as heroin, cocaine, cannabis, LSD (Zemis 2013). This no doubt has made many teenagers fall into a mental disorder and indulge in criminal activities in other to satisfy the insatiable state of desire for these drugs.

Many scholars have worked on hard drugs and their effects on youth. Some of the areas include, uncertainty and mixed strategies, frustration, depression, peer pressure amongst others have been identified as some causative factors by notable scholars. However, no study has been carried out on teenagers' use of hard drugs and mental health problems in Yenagoa, Bayelsa state. Aviad (2012) argued that "uncertainty and mixed strategies" contributed to drug addiction, a commission of a crime and mental health. Accordingly, it is either the victim is "depressed" or "excited". Expressing his opinion from an economic point of view, Aviadposit thus:

"Each choice has a strategy of itsown, He defined the probability with which each profile of all player's choices could be "realized". Overall, each of the player's strategies defines a lottery over the strategy profiles in the game. In order to decide which strategy to choose, the player then has to figure which of the lotteries included he prefers. In other words, the player's preferences over these lotteries are expressed by the expected utility".

Closely related to the Nigerian society and Bayelsa state in particular, there is high trend of uncertainty in the scheme of human activities. Parents and children are not sure of gainful employment even after completion of quality education. Employers and employees are not sure of their pension's schemes and other fringe benefits. Thus, some parents being uncertain of certain social and economic fortunes derelict their fundamental duties as parents. Teenagers on their part had to take decisions based on peer influences and elsewhere than listening to proper parental counselling, and engaged in drug addiction, thereby leading to mental health.

Chigozi (2017) in his work argued that social diseases are insidiously spreading to the youths who engage in sports, movie industries and other activities of life, most likely take to the trade of selling and trafficking of these drugs home and abroad, thereby landing in prisons/correctional centers. The associated effect is not only the victim but also parents, wife, and relatives who were depressed over the bleak future of their wards.

Discussing further, United Nations Office on Drugs and Crime (UNODC 2014) described hard drugs as drugs specifically

not permitted by-laws, rules, or customs of a people. They listed heroin, cocaine, and marijuana. Others are lysergic acid diethylamide (LSD) ketamine, gamma-hydroxybutyrate (GHB).Iruoh and Amadi (2008) further state that hard drugs are substances not allowed by law in the hands of unauthorized persons in any given society, to be possessed, sold or consumed. They identified amphetamines, tobacco, alcohol, nicotine and barbiturates.

Chigozi (2017) identified four types of hard drugs; psychomotor stimulants, narcotics, analgesic, anabolic steroids and hallucinogens. These all have good and mostly bad effects when it becomes an addiction.

Psychomotor stimulants: These are psychoactive drugs that increase or speed up activities of the Central Nervous System (CNS), (Achalu 2012). Crack- cocaine, powder cocaine, methamphetamines and amphetamines all fall within this category. Levinthal (2005) stated that some possible signs of cocaine abuse include: dilated (enlarge)pupils, increase heart rate, increase irritability, paranoia, sneezing and irritability in the nose, feeling of depression, insomnia, decrease appetite and significant weight loss. Chigozi (2017) posits that in the chemistry of amphetamines, methamphetamines are derived to spend its substance passage across the 'brain barrier'. Based on its functions in alerting the brain quicker, many abuse it to achieve maximum sexual intercourse while others use it to commit a crime. Thus, most mental health among teenagers may be related to the addiction to psychomotor stimulants drugs.

Narcotics Analgesic: These drugs relieve pain, induce sleep, and are addictive. They are found in heroin, codeine, opium, etc. Narcotics are pain killers. These drugs are used to treat pains. Some common them are morphine and codeine used primarily for the treatment of patients with acute pains (Oriji, 2012). Equally also, (2002) sees narcotics as those drugs that can stop the brain from feeling pain, as well as used to induce sleep, in order to relieve pains, during surgery in hospital.

Anabolic Steroids

These are drugs that are used to build the body; hence, they are called "body-builders" (Oriki, 2012). So-called anabolic steroids are synthetic derivatives of testosterone developed in an attempt to minimize testosterones' androgenic or musculinising effects on the individual while promoting protein synthesis and muscle growth (Fields, 1995). In that, the hormone promotes the development of male sex characteristics. The second However, to understand how testosterone-based steroids produce ergogenic (performance-enhancing) changes, which perform two primary effects on the human body (Levinthal, 2005), the first and most obvious effect is androgenic (literally, "manproducing") effect is anabolic (upward-changing), in that it promotes the development of protein and, as a result, an increase in muscle tissue (Levinthal, 2005). Apart from the benefit those who use steroids get, there are problems resulting from its being abused. The problems include:

- A. Liver and kidney damage;
- B. Breast development;
- C. Acne;
- D. Baldness;
- E. Cysts;

- F. Shrinking of the testicles and sterility;
- G. Reduced sex drive; and
- H. Headache, nausea and dizziness (Fields, 1995)

For females, the drug can cause:

- A. Infertility;
- B. Clitoral enlargement;
- C. Breast atrophy;
- D. Menstrual irregularities, etc. (Fields, 1995)

Hallucinogens: These are drugs that alter the sensory processing unit in the brain. They produce distorted perception, feelings of anxiety and euphoria, sadness, and inner joy. They normally come from marijuana, LSD, etc. These are psychedelic drugs that affect the brain; and thus could cause faint processing and interpretation of muscles and reasons in the user's body (Oriji, 2012). In other words, hallucinogens are psychedelic drugs, which alter consciousness; psychotomimetic, which mimics psychosis; and psychotogenic, which produces pyschosis (Fields, 1995). Fields (1995) also explains that hallucinogens are capable of altering time and space perception; changing feelings of selfawareness and emotion; changing one's sense of body image; and increased sensitivity to textures and shapes, sounds, and taste. Apart from this, hallucinogens fall into three principal categories: (a) those that are chemically similar to serotonin (LSD), psilocybin, morning glory seeds, DMI and harmine; (b) those that are chemically similar to norepinephrine (mescaline, DOM, MDMA and MDA); and (c) those that are chemically similar to acetylcholine (atropine, scopolamine, hyoscyamine and ibotenic acid) (Levinthal, 2005).

Onwubuiko (2012) stated that unfortunately, many people turn to substances as an easy or perceived helpful way to copewith frustration and career pressure. These areas of frustration include; grieving a death, end of a relationship, mental illness, environmental influences, Relaxation, Selfmedication, Financial burdens, while Career pressures include:

School pressures, Family demand, Peer and Social Pressure, Abuse and trauma Boredom, To fit in, Curiosity and experimentation, Rebellion, To be in control To enhance performance, Isolation, Misinformation or ignorance, Instant Gratification Wide availability.

- **B. Miscellaneous:** This is a group of volatile solvents or inhalants that provide euphoria, emotional disinhibiting and ever-lasting distortion of thought to the user. The main sources are glues, spot removers, tube repair, perfumes, chemicals, etc.
- **C. Tranquilizers:** Tranquilizers are believed to produce calmness without bringing drowsiness. They are chiefly derived from Librium, Valium among others.

The Effects of Drug Abuse on Health

Substance use disorders are associated with a wide range of short- and long-term health effects. They can vary depending on the type of drug, how much and how often it's taken and the person's general health. Overall, the effects of drug abuse and dependence can be far-reaching. They can impact almost every organ in the human body.

Side effects of drug addiction may include:

A weakened immune system, increasing the risk of illness and infection.

- Heart conditions ranging from abnormal heart rates to heart attacks and collapsed veins and blood vessel infections from injected drugs
- Nausea and abdominal pain, which can also lead to changes in appetite and weight loss.
- Increased strain on the liver, which puts the person at risk of significant liver damage or liver failure
- > Seizures, stroke, mental confusion and brain damage
- Lung disease
- Problems with memory, attention and decision-making, which make daily living more difficult
- Global effects of drugs on the body, such as breast development in men and increases in body temperature, which can lead to other health problems
- The most severe health consequence of drug abuse is death. Deaths related tosynthetic opioids and heroin have seen the sharpest rise. In the past 12 months, 212,000 people aged 12 or older have used heroin for the first time. Every day, more than 90 Americans die after overdosing on opioids.

Effects of Drug Addiction on the Brain

All drugs-nicotine, cocaine, marijuana and others affect the brain's "reward" circuit, which is part of the limbic system. This area of the brain affects instinct and mood. Drugs target this system, which causes large amounts of dopamine a brain chemical that helps regulate emotions and feelings of pleasure to flood the brain. This flood of dopamine is what causes a "high." It's one of the main causes of drug addiction stated (Taylor 2008). Although initial drug use may be voluntary, drugs can alter brain chemistry. This can change how the brain performs and interfere with a person's ability to make choices. It can lead to intense cravings and compulsive drug use. Over time, this behavior can turn into 24 substance dependency or drug and alcohol addiction. Alcohol can have short- and long-term effects on the brain and disrupts the brain's communication pathways. These can influence mood, behavior and other cognitive function.

Mudashir (2016) posits thatbrain damage may also occur through alcohol-induced nutrition deficiencies, alcoholinduced seizures and liver disease. In pregnant women, alcohol exposure can impact the brains of unborn babies, resulting in fetal alcohol spectrum disorders. It is reported that alcohol-induced brain problems can often be corrected with proper treatment. Abstinence from alcohol for months or years can help partially repair thinking abilities, like memory skills.

Drug Effects on Behavior

On his part, Ogene (2012) assert that substance use disorders can lead to multiple behavioral problems, both in the short- and long term, which can include: paranoia, aggressiveness,

hallucinations, addiction, impaired judgment, impulsiveness, loss of self-control.

Cardiovascular disease

Stimulants, such as cocaine and methamphetamines, can damage the heart and blood vessels. The long-term use of these drugs can lead to coronary artery disease, arrhythmia, and heart attack Respiratory problems. Drugs that people smoke or inhale can damage the respiratory system and lead to chronic respiratory infections and diseases. Whereas, opioids slow a person's breathing by binding to specific receptors in the central nervous system that regulates respiration. By depressing a person's respiration, these drugs can lead to slow breathing or heavy snoring.

Other Diseases and Illnesses

Injection drug users (IDUs) are more likely to develop serious infections and illnesses (e.g., viral hepatitis, endocarditic, pneumonia, and other bacterial infections) than the non-IDU population due to the harmful effects of drug injection and their infrequent use of primary medical care services. Additionally, some forms of psychiatric disorders may result in part from drug abuse (e.g., depression, PCP-precipitated psychosis).

Violence and Crime

Violence and crime are linked to illicit drug abuse through the often violent nature of drug sales and distribution. Additionally, some drug addicts resort to theft to support their drug habits. Pharmacological effects of drug abuse associated with violent actions may occur de novo or with predating co-occurring psychiatric disorders. Violence and crime are linked to illicit drug abuse through the often violent nature of drug sales and distribution. Additionally, some drug addicts resort to theft to support their drug habits. Pharmacological effects of drug abuse associated with violent actions may occur de novo or with predating cooccurring psychiatric disorders, (Fields, 1995).

Loss of Human Capital

Drug abuse can have devastating impacts on an individual's potential (e.g., school delinquency, dropping out of school, involvement in illicit drug selling), thus reducing future educational and job opportunities.

Family

Drug abuse leads to reallocation of economic support away from the family; lack of participation in family activities, including caregiving; lack of emotional commitment and support for parents and children; and the inability to provide a reliable and adequate role model for other family members, especially children. This impact on the family affects children's development, leaming, and social relations whether or not actual child abuse and neglect occur (Fields 1995).

Education

Drug-abusing students may develop cognitive and behavioral difficulties; disrupt classes; have increased psychosocial problems; or be delinquent in attending school or drop out of school (Kandel and Davies, 1996). Additionally, violence increases as buying and selling of drugs occur at the school site.

Roles of Nigerian Correctional Service in the Use of Hard Drugs among Teenagers in Bayelsa State

Most inmates jailedor remanded in Yenagoa correctional Centre were offenses committed as a result of drug addiction, (Abdulraheem&Fumilayo, 2013). Accordingly, the most frequently used substance among teenagers in Yenagoa Local Government is alcohol, cigarettes, cocaine, marijuana and amphetamines. Abdulraheem and Fumilayo (2013) stated that (26.8%) are addicted to cigarette, (24.2%) marijuana while (13.8%) is cocaine addicts. This invariably causes (46.8%) of mental health teenagers, (Federal Ministry of Health, 2019).

Therefore, the Yenagoa correctional centreis a home for rehabilitation and reformation is expected to carry out specific responsibilities on the lives of inmates. These roles will enable such to become functional citizens, self-reliance and recovery from economic injustice (Igwesi, 2018).

The Nigeria correctional centre is established to imprison criminal offenders. It also has a vacuum for other services. These are: to provide services and interventions that will contribute to the integration of offenders as law-abiding citizens into communities by ensuring that probationers are rehabilitated, monitored and accepted by societies, Martins (2014). This is believed will prevent the communities from experiencing habitual crimes, prevent recidivism and avoid mental health.

Zems (2013) posits that the correctional centre can give vocational training to inmates. Such training includes pipe fitting, plumbing, painting, welding, carving etc. however, it is imperative for the correctional centre to engage drug addicts and recidivists inmates in skills and training that will engender sustainable development in their lives. These include qualitative education, skills acquisition such as driving, control and monitoring of their peer's relationship etc.

On the contrary, this is not found in Okaka correctional centre Yenagoa. There are lots of weaknesses in the centre. Respondents indicate that familiarity with drug addicts, recidivists' inmates, continue to encourage the ugly social impasse. Corruption and bribery is another noticeable factor. Parents, relatives and visitors of inmates are known to drop some money with personnel of the service. These moneys are alleging to have been used to purchase hard drugs for inmates. Farming, artisan and other works are done by drug addict inmates.

This money they generated is used by an official to purchase drugs for such inmates. They play a negative role to a large extent in the use of hard drugs. Therefore, the new ideation of this work is the question about the effectiveness of the Nigerian Correctional Service. In other words, one can rightly ask; has this Centre help our society tame all drug addicts' inmates brought to them for rehabilitation?

Theoretical Framework

The idea of anomie means the lack of normal ethical or social standards. This concept first emerged in 1893, when French sociologist Emile Durkheim published his book entitled, The Division of Labor in Society. In this book, Durkheim indicated that the rules of how individuals interact with one another were disintegrating and therefore people were unable to determine how to act with one another. As a consequence, Durkheim believed that anomie was a state where the expectations of behavior are unclear, and the system has broken down. This is known as normlessness. Durkheim claimed that this normlessness caused deviant behaviors, and later, as claimed in his 1897 work, Suicide, depression and suicide.

Durkheim's theory was based upon the idea that the lack of rules and clarity resulted in psychological status of worthlessness, frustration, lack of purpose, and despair. In addition, since there is no idea of what is considered desirable, to strive for anything would be futile. In criminology, the idea of anomie is that the person chooses criminal activity because the individual believes that there is no reason not to. In other words, the person is alienated, feels worthless and that their efforts to try and achieve anything else are fruitless. Therefore, with a lack of any foreseeable alternative, the person falls into criminal activity.

When applying Durkheim's theory, one could conceive of an example where the theory would apply. For instance, imagine a poor, inner-city teen with no access to job training or college. Crime pervaded the child's world from birth; all of the child's siblings were in a gang and served time in juvenile detention. The parents were uninvolved and had criminal histories. The teen, now an adult, was chronically unemployed and felt worthless, with no direction or sense of purpose. The teen became involved in crime as an outlet, because he felt that there were no other options; to try to achieve a higher purpose would be a waste of time.

Example: John grew up in a war zone where he witnessed senseless killings and bombings. He witnessed members of his family being murdered, and those who survived exhibited symptoms of major depression and post-traumatic stress disorder (PTSD). Other survivors close to him became drug addicts. John had to drop out of high school due to the violence and was often hungry and exhausted. Disillusioned, he frequently contemplated suicide, and when he was old enough, he bought a gun and began to unleash violence and terror on those around him.

Differential Association Theory

'Differential Association theory is a criminology theory that looks at the acts of the criminal as learned behaviors. Edwin H. Sutherland is credited with the development of the Differential Association theory in 1939. Sutherland, a sociologist and professor most of his life, developed Differential Association theory to explain how it was that criminals came to commit acts of deviant behavior. With the fourth edition of his book, Principles of criminology, in 1947 Sutherland finalizes his theory that deviant behavior is socialized through lack of opposition to such behavior. In his theory, Sutherland assesses' that criminal behavior is not to be explained away by deeming the criminal 'simple.' As do most social learning theories, Differential Association theory, believes that the behaviors of an individual are influenced and shaped by other individuals they associate with. The primary reference group is that of the nuclear family, which the individual lives and grows up with. It is believed that these interactions formulate the individual's understanding of societal norms and values. It is then assumed that if the individual is capable of learning what is acceptable in society, they are also not capable of learning what is considered unacceptable.

Criminal behavior is learned in interaction with others in a process of communication. From the moment an individual is born they are being conditioned to the norms of society. They learn gender roles through their interactions with their parents and observations of gender-specific characteristics. Interaction and observations are the same methods of communication through which criminals learn their deviance. Criminal behavior, Differential Association theory argues, is more prevalent in individuals who associate and interact with individuals who exhibit criminalized to act defiantly. Pfohl writes in his book, Images of deviance and social control, that the likelihood of deviant behavior could be determined by calculating the difference between favorable and unfavorable associations (1994).

Differential associations vary in frequency, duration, priority, and intensity. Referring to the contact an individual

must have with proponents of criminal behavior; this principle suggests that there is a varying, but direct, relationship that affects how often, for what length of time, how important and how intense deviant behavior occurs. Learning criminal behavior occurs within primary groups (family, friends, peers, their most intimate, personal companions). An individuals' behavior is primarily influenced by their family since that is the first group interaction they receive. Additionally, an individual's behavior is influenced by their peer group (through direct and indirect interaction) and through their intimate relationships with other individuals.

Learning criminal behavior involves learning the techniques, motives, drives, rationalizations, and attitudes. Surely, just because an individual has a criminal in their primary reference group doesn't mean that they'll partake in criminal behavior. However, it does mean that they a resource for the criminal rationale. Criminals are not inherently deviant, they learned deviance. They were taught to rationalize what they once knew to be unacceptable behavior into acceptable behavior. For example, many convicted sexual assailants admit that the first time they committed sexual assault they felt guilty. The guilt comes from their socialization of societal norms that rape is unacceptable. The specific direction of motives and attitudes is learned from definitions of the legal codes as favorable or unfavorable. This principle comes into play when considering cultural variations and/or interpretations of legal codes. In specific, in the United States, there are so many different cultures and each culture's interpretation of what is favorable or unfavorable varies. Cultural norms can conflict with societal norms.¹

A person becomes a criminal when there is an excess of definitions favorable to violation of law over definitions are unfavorable to violation of the law. This is the dominant premise for Differential Association theory. The premise that because individual associates with more members of a group who favor deviance, than with members of a group who favor societal norms, that individual is more or less of learning criminal behavior involves all the mechanisms involved in any other learning. Accordingly, this means that criminal behavior, like any other learned behavior, is not only learned through observance but assorted methods as well. For example, coercion and seduction could lead to acts of deviance. Also, criminal behavior can be credited to acts of spontaneity.

Although criminal behavior is an expression of general needs and attitudes, criminal behavior and motives are not explained nor excused by the same needs and attitudes, since no criminal behavior is explained by the same general needs and attitudes. This last principle asserts that even those criminals, who rationalize their behaviors as trying to fulfill basic needs, are not above reproach. Non-criminals are subject to obtain the same general needs as criminals and do so in a non-deviant fashion. Criticism of Sutherland's Differential Association theory includes the assumption that Sutherland was suggesting the mere interaction with criminals would lead an individual to criminal behavior. This was not Sutherland's proposal. The differential associate was intended to create multiple facets to consider when evaluating deviant behavior. The most principal being that if an individual is exposed to more social acceptance of deviance that they are exposed to the opposition of deviance, that individual is more apt to function defiantly.

AREA OF THE STUDY

The study focuses on Okakacorrectional center, YenagoaBayelsa State Nigeria. The Prison is made up of Prison staff and inmates. Okaka correctional service is located in the Yenagoametropolis, the capital city of Bayelsa State. It was commissioned in April 2013 by the then minister for interior, Mr. Abba Moro. The facility was built and commissioned in April 2013 to house 300 inmates. According to an interview granted to ChineduWosu of GP newspapers on 30th August 2017, Yenagoa, the state controller of prisons Bayelsa State has lamented that the Okaka medium security is overstretched with an amount of five hundred and eighty-eight 588 inmates as against the three hundred (300) inmates which were originally built for. From the Nations newspapers 2017, it was observed that about five hundred and fifty (550) inmates were waiting for trial while thirty-eight 38 have been convicted. However, like every other correctional facility, it has its numerous challenges and success. Ekpenyong(2016), states that prison Rehabilitation takes numerous forms from education, counseling and religious services. According to the Nigerian Prisons Bulletin (2021), the current figure stands at 250 inmates and 300 staff.

METHODOLOGY

The research design adopted for this study was a descriptive survey. Daramola (2006) described a descriptive survey as the systematic attempt to describe the characteristics of a given population of the area of interest factually. The population of the study consists of 350 Nigerian Prison personnel and 250 inmates from OkakaYenagoa Correctional Centre making a total of 550. (Nigerian Prison Service Bulletin, 2021). A sample size of two hundred and thirty-two (232) representing 38% of the population was selected through simple random sampling technique. The instrument used for this study was a researcher-designed structure questionnaire. The questionnaire consisted of two main parts 'A' and 'B'. Section 'A' dealt with the demographic data of the respondents which presents information on gender, age, occupation and educational qualification of the respondents. Section B on the other hand consists of fifteen (15) items that sought information on the causes of the use of hard drugs among teenagers and another fifteen (15) items on consequences of use of hard drug abuse among teenagers. The validity of the instrument was determined through the face and content approaches. This was done through expert in test construction and evaluation to determine the validity of the instrument. The researcher used a test re-test method of reliability. The instrument was administered twice at an interval of two weeks to the respondents that were not part of the study sample. Pearson Product Moment Correlation was used to correlate the score and it yielded a coefficient of 0.69 and the instrument was considered very reliable. Percentages were used to describe the demographic characteristics of the respondents and research questions.

Method of Data Analysis

Data obtained were analyzed using simple percentage analysis. Result was presented in table.

Research Question 1:

Why does teenagers use hard drugs in Yenagoa, Bayelsa State?

S/N	ITEMS	Response Yes % No %	
1	Ineffective Government control of drugs	148, 63.8	84, 36.2
2	Uncertainty, frustration and depression.	164, 70.7	70, 29.3
3	Culture and norms of society	133, 57.3	99,42.7
4.	Exposure from parents used of hard drugs	120,51.7	112,48.3
5	Peer group pressure	182,78.4	50,21.6
6	Lack of parental care	173,74.6	59,25.4
7.	Family background	146,62.9	86,37.1
8	Weak Institutions	150,64.7	82,35.3
9	Social media influence	163,70.3	69,29.7
10	Social environment	170,73.3	62,26.7
11	Poor funding of correctional centers	149,64.2	83,35.
12.	Dependency Factor	175,75.4	57,24.6

Source: Field Survey 2021.

From the table above, it is obvious that listed encourage drug addiction by teenagers in BayelsaState.

Research Question 2:

Howdoes the consumption of hard drugs affect teenager's mental health in Yenagoa, Bayelsa state?

S/N	ITEMS	Response	
3/1	I I EMIS	Yes %	No %
13.	Low self esteem	162,69.9	70,30.1
14.	Destabilize lifestyle	153,65.9	79,34.1
15.	Social alienation	148,63.8	84,36.2
16.	Indulge in negative deviant behavior	1 75, 75.4	57,24.6
17.	Frustration, depression and suicide	156,67.2	76,32.8
18.	Psychological disorder mational Journal	149,64.2	83,35.8
19.	Violence and instability	139, <mark>59</mark> .9	93,40.1
20.	Dropping out of school	162,69.8	70,30.2
21.	Poor academic performance arch and	178,76.7	54,23.2
22.	Inappropriate dressing Development	145,62.5	87,37.5
23.	Fault finding on others over their circumstances	150,64.7	82,35.3

Source: Field Survey 2021.

From table 2 above, the data indicates that all listed items constitute consequences of drug addiction.

Research Question 3:

How has the Okaka correctional center aid in the rising trend of teenagers use of hard drugs and mental health?

S/N	ITEMS	Resp Yes %	onse No %
24.	Familiarity with prison warden may help to buy hard drugs for inmates	180,77.6	52,22.4
25.	Bribery and corruption may allow prison personnel to buy cigarettes for inmates	175,75.4	57,24.6
26.	Fear of inmates aids prison personnel to buy hard drugs for inmates	148,63.8	84,36.2
27.	Political interference on recidivism may help to purchase hard drugs for inmates	170,73.3	62,26.7
28.	Money generated by inmates are mostly used by prison personnel to buy hard drugs for inmates	162,69.8	70,30.2

Source: Field Survey 2021.

From table 3 above, data shows that the Nigerian Correctional Centre in Yenagoa aided in the use of hard drugs.

Research Question 4:

How has family members and friends involved in the supply of hard drugs to inmates in Okaka correctional service?

S/N	ITEMS	Respo Yes %	nse No %	
29.	Relatives smuggle hard drugs through consumables (bread, beverages, fufu, soup, etc)	182, 78.5%	50, 21.5%	
30.	Relatives and friends bribe personnel to smuggle hard drugs through clothes and foot wears	156, 67.2	76, 32.8	
Source Field Summer 2021				

Source: Field Survey 2021.

RESULTS AND DISCUSSION

The use of hard drugs by teenagers with its attendant social effects is more societal fable but rather it becomes a social menace that must be drastically dealt with it. Findings in table 1 revealed that there is great awareness of the ills of using hard drugs and some typology of hard drugs. This is in line with the work of Igwesi (2018) who posits that "members of society are aware of the inherent danger caused by the use of psychoactive and addictive drugs such as cannabis, heroin, and cocaine just to mention but few. Similarly, Jonathan (2019) asserted that hard drugs had been littered in society. These include Tramadol, DMT, inhalers etc. Jonathan averred that it has destroyed the vision and dreams of many young teenagers in Nigeria.

In table 2, findings indicate that all the items constitute the use of hard drugs among teenagers. A lot of scholars had argued on these points. Balamurugan (2018) states that family background, poverty, lacks parental care and environmental causes can enhance the use of hard drugs. Abdu-Raheen (2013) emphasized the role of peer group influence. Peers had a great role among themselves, hence, they encouraged their friends to join in their abnormal and uncultured lifestyle.

Adegboro (2014) states that the rehabilitation institutions constitute the agency for socialization: family, church, school, Clen mass media and political party. Accordingly, they have lost [4] focus in building and inculcating moral values among the teenagers, hence they became a "social ship without sailor" in other words, poor rehabilitation institutions also contributed to the use of hard drugs.

In table 3, findings revealed that the Nigerian Correctional in [5] Akanbi, M. I., Godwin, A., Anyio, B. T., Muhammad, M. service enhances inmates in using hard drugs by purchasing for inmates while in their custody. They do this due to familiarity, corruption among personnel, political influence and interference as well as preferential treatment. This in line with the works of Zems (2013) who assert that the Nigerian prison institution is growing worse daily due to alleged cases of congestion, corruption and special treatment to some inmates.

In table 4, findings revealed that the addictive use of hard drug substance will degenerate into many factors such as low self-esteem, destabilize lifestyle, social alienation, indulging in criminal behaviour, poor health, violence, inability to admit their failure and social inactions,etc (Atoyebi 2013; Ekpenyong 2012; Enakpoya 2009; Eremie 2015).

CONCLUSION AND RECOMMENDATIONS

A critical examination and analysis of the use of the hard drug among teenagers in Yenagoa metropolis, Bayelsa state shows that its cause by societal, environmental factors and socioeconomic status of parents. This has limit drastically led to the commission of many criminal activities in Bayelsa state, thereby reducing its manpower development. Therefore, the following recommendations were made;

- 1. The government at all levels should effectively enforce rules and regulations guiding the consumption of hard drugs in Bayelsa state.
- The family institution should be properly planned and 2. organized with a view to operate at a measurable level of socio-economic status where the basic needs of man can be provided by parents to avoid addictive lifestyle.

- 3. NAFDAC and another drug regulatory commission should reinvigorate their effort to control the sales of the hard drug by punishing offenders.
- 4. Teenagers should be given the prerequisite training for building personal confidence among their peers.
- 5. Moral teaching should be consistently given to teenagers by all leaders of various institutions and socialization agencies such as the family, church, school, mass media and political parties.

REFERENCES

- Abdu-Raheem, B. O. (2013). Sociological factors to [1] drug abuse and the effectson secondary school students' academic performance in Ekiti and Ondo States, Nigeria. Contemporary Issues in Education Research – Second Quarter, 6(2), 1-8.
- [2] Adegboro J. S. (2014). Drug abuse among students of AdekunleAjasinUniversity, AkungbaAkoko, Ondo State, Nigeria. International Journal of Education and *Research*, 2(4), 29-36.
- Adegboyega, L. O., Oniye, A. O. & Adigun, A. (2015). [3] Motivations for drug abuse among students of tertiary institutions in Kwara State, Nigeria. Ife Journal of Behavioural Research, 7(1&2), 29-34.
- Adigun, A.A. (2014). Prevalence of, and motivation for drug abuse among students of tertiary institutions in *Kwara State*. Unpublished M. Ed Project, Department of Counsellor Education, University of Ilorin Printing Press.
- & Ajiboye, S. A. (2015). Impact of substance abuse on academic performance among adolescent students of Colleges of Education in Kwara State, Nigeria. Journal of Education and Practice, 6(28), 108-112.
- [6] Armstrong, T. D., Costello, E. J. (2002). Community studies on adolescent substance use, abuse or dependence and psychiatric co morbidity. J Consult *Clin Psychol.* 7(6), 1224–1239.
- [7] Atoyebi, O. A. & Atoyebi, O. E. (2013). Pattern of substance abuse among senior secondary school students in a Southwestern Nigerian City. International Review of Social Sciences and Humanities, 4(2), 54-65.
- [8] Balogun, S. K. (2006). Chronic intake of separate and combined alcohol and nicotine. Center for Disease Control (CDC, 2000). HIV/AIDS: Frequently asked questions on HIV/AIDS. Retrieved from www.cdcnpin.org/hiv/faq/preventionJitm
- [9] Barnard, M. & McKeganey, N. (2004). The impact of parental problem drug use on children: what is the problem and what can be done to help? Addiction. 99(5), 552-559.
- [10] Chukwuka, C. O. (2015). Truancy among secondary school students in Eboniyi South education zone. Retrieved on 20th September, 2017 from http://www.doublegist.com.
- [11] Daisy, I. D., &Lydia, W. A. (2020). Gender differences in cigarette smoking habits of secondary school students in Yenagoa Local Government Area, Bayelsa

State, Nigeria. *American International Journal of Contemporary Research*. 6(1).

- [12] Durani, Y. (2012). Getting the facts: Drugs and alcohol. Retrieved from http://www.kidsheath.org/teens/drugsandalcohol. htm. educational performance of some adolescents' drug abusers in Ibadan".
- [13] Ehindero, S. A. (2015). Truancy among public secondary school students: Implication for counseling. *Journal of Emerging trends in Education Research and Policy Studies*, 6(7), 331-338.
- [14] Ekpenyong, S. N. (2012). Drug abuse in Nigerian schools: A study of selected secondary inBayelsa State, South-South, Nigeria. *International Journal of Scientific Research in Education*, *5*(3), 260-268.
- [15] Ekpo, A. U. (1981). Marijuana is very harmful. *Nigerian Gong*, 9-11.
- [16] Enakpoya, E. (2009). *Prevalence of drug abuse among Nigerian adolescents.* J. J. Classic Publishers Ltd.
- [17] Encyclopedia (2004). Vol. 6, *World Book*.
- [18] Eremie, M. D. (2015). Counsellors and teachers ranking of factors truancy among Secondary School in Rivers State, Nigeria. Arabian Journal of Business and Management Review, 5 (163), 25 - 35.
- [19] Eremie, M. D. (2015). Counsellors and teachers ranking of factors truancy among secondary school in Rivers State, Nigeria. Arabian Journal of Business and Management Review, 5 (163), 25 – 35.
- [20] Erikson, E. H (1974). *Identity youth and crisis*. London: [35] Feber and Feber.
- [21] Escandon, R., & Galvez, C. (2006). *Free from* [3 *addictions*. Madrid: Editorial safeliz.
- [22] Eskiner, E. &Gedif, T. (2006). Prevalence of khat, cigarette and alcohol use among students of technology and pharmacy, Addis Ababa University. *Ethiopian Pharmaceutical Journal, 24,* 116-124.
- [23] Ford, J. (2001). Substance use and self-reported mental health: The moderating effect of acquaintance use behavior among adults. *Journal of Drug Issues*, *31*(2), 565–590.
- [24] Henriksson, C. &Leifman, H. (2012). *School children's drug habit in 2012*. Report No. 133.
- [25] Ibrahim, H. A. Mahmud, S. Abubakar, A. Harazimi, C. &Abdulkadir, S. (2016). Effect of drug abuse among youth and its impact on learning. *IOSR Journal of Pharmacy and Biological Sciences (IOSR-JPBS)*, 11(1), 14 – 17.
- [26] Johnston, L. D. & O'Malley, P. M. (2001). Drug use and abuse: psychosocial aspects. In: International Encyclopaedia Social &Behavioural Sciences, 3861– 3866.
- [27] Kelly, K. J., Comello, M. L, &Hunn, L. C. (2002). Parentadolescent communication, perceived sanctions against drug use, and youth drug involvement. *Adolescence. 37*(148), 775–787.
- [28] Koinyan, A. (2013). Water resource utilization in Yenagoa, central Niger Delta: Environmental and

health implication. *Journal of Water Resources and Environmental Engineering*, 5(4), 177–186.

- [29] Kumesa, S. T., Mohammed, M. A., Gebremariam, E. T., Gelaw, B. K., Seifu, M. F. & Tirumurgan, G. (2015). The prevalence and pattern of social drug abuse among students of Rift Valley University College, Bishoftu Campus, 2014. *Journal of Pharma Care Health System*, 2(1), 1-7.
- [30] Maloma, F. (2017). *Factors influencing drug abuse among in-school adolescents in Ilorin metropolis.* An unpublished B. Ed. Project, Department of Counsellor Education, Institute of Education, University of Ilorin Printing Press.
- [31] McNeely, C. A. & Barber, B. K. (2010). How do parents make adolescents feel loved? Perspectives on supportive parenting from adolescents in 12 cultures. *Journal of Adolescent Research, 25,* 601-663.
- [32] Melchior, M., Chastang, J. F., Goldberg, P. &Fombonne, E. (2008). High prevalence rates of tobacco, alcohol and drug use in adolescents and young adults in France: results from the GAZEL Youth study. *Addict Behaviour, 33*, 122-33.

[33] Merki, B. (1996). *Teen health, decision for healthy living*. McGraw-Hill.

[34] Mousavi, F., Garcia, D., Jimmefors, A., Archer, T. &Ewalds-Kvist, B. (2014). Swedish high-school pupils' attitudes towards drugs in relation to drug usage, impulsiveness and other risk factors. *Peer Journal, 2,* 410.

NAFDAC (2004). A hand book on prevention of drugs and substance abuse in Nigeria. NAFDAC.

from [36] NAFDAC (2008). *Do drugs control your life? Know the* SSN: 2456-6470 *risks*. NAFDAC.

- [37] National Population Census-NCP. Bayelsa State Population Census, National Population Census, Federal Republic of Nigeria. 2006.
- [38] Njeru, A. N. & Lewis, N. (2014). Causes and effects of drug and substance abuse among secondary school students in Dagoretti Division, Nairobi West District-Kenya. *Global Journal of Interdisciplinary Social Sciences*, 3(3), 1 – 4.
- [39] Nyaga, P. (2001). Unpublished seminar paper on substance abuse presented at Nakuru High school during the NakuruSub-county mathematics and science in-service course for teacher, Nakuru.
- [40] Office of National Drug Control Policy (ONDCP). 2009 national survey on drug use and health highlights. 2010.
- [41] Olatunde, A. (1979). *Self-medication: Benefits, precautions and dangers, on body maintenance among Albinorats. Journal of Human Ecology, 19*(1), 21-24.
- [42] Organization Expert Committee on Dependence Producing Drugs. Fourteenth.
- [43] Oriahi, I. F., Ajekweneh, M. &Oriahi, C. I. (2010). Causes and effects of drug abuse among secondary school adolescent in Esan West Local Government, Edo State, Nigeria. http://www.injoprado.com/html.

- [44] Perkinson, R. R. (2002). *Chemical dependency counselling.* Sage Publication.
- [45] Rockville. (2010). Substance Abuse and Mental Health Services Administration (SAMHSA). Results from the 2009 National Survey on Drug Use and Health: I. Summary of National Findings (Office of Applied Studies, NSDUH Series H-38A, HHS Publication No. SMA 10-4586 Findings).
- [46] Santrock, W. (2001). *Adolescent problems.* McGraw Hill Co Ltd.
- [47] Schuster, C., O'Malley, P. M., Bachman, J. G., Johnston,
 L. D. & Schulenberg, J. (2001). Adolescent marijuana
 use and adult occupational attainment: A longitudinal
 study from age 18 to 28. Use Misuse, 36, 997-1014
- [48] Seraphim T, (2005). *Addiction is also pharmacological*. http://www.meadowlake.
- [49] Simatwa, E. M. W., Odhong, S. O., Juma, S. L. A. &Choka, G. M. (2014). Substance abuse among public secondary school students: Prevalence, strategies and challenges for public secondary school Managers in Kenya: A case study of Kisumu East Sub County. Educational Research, 5(8), 315-330.
- [50] Stanton, B., Li, X., Cottrell, L. &Kaljee, L. (2001). Early initiation of sex, drug-related risk behaviours, and sensation-seeking among urban, low-income African-

American adolescents. *Journal of National Medical Association*, 93, 129–138.

- [51] Thomas, M. & Allen, A. (2009). *Religiosity, spirituality, and substance abuse.* A published M. Sc. Thesis, Department of Criminal Justice in the Graduate School of. The University of Alabama.
- [52] Tsering, D., Pal, R. &Dasgupta, A. (2010). Substance use among adolescent high school students in India: A survey of knowledge, attitude, and opinion. *Journal of Pharm Bioallied Science*, *2*(2), 137–140.
- [53] UNDCP (1996). Drugs and development: The social impact of drug abuse. Viena: UNDCP. undergraduates. World Journal of Medical Sciences. 1(2), 133-139.
- [54] UNICEF & WHO (2006). Global school-based health survey report. WHO. http://www.who.int/chp/gshs/UNICEF-GSHC-Report-Oct-07.pdf.
- [55] United Nations Office on Drugs and Crime (UNODC)(2011). World drug report, United Nations.
- [56] United Nations Organizations on Drug Council (UNODC) (2005). World Health
- [57] UNODC (2012). *World drug report*. United Nations Office on Drugs and Crime, 10-18.
- [58] UNODC (2014). *World drug report*. United Nations Publication,

of Trend in Scientific Research and Development