

Substance Abuse and the Nigerian Youth

PREVALENCE, TRENDS AND PREVENTIVE MEASURES

A PRESENTATION AT MANAGING SUBSTANCE ABUSE AND ASSOCIATED MENTAL HEALTH ISSUES IN NIGERIAN YOUTH,
JUNE 20, 2018

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Definitions

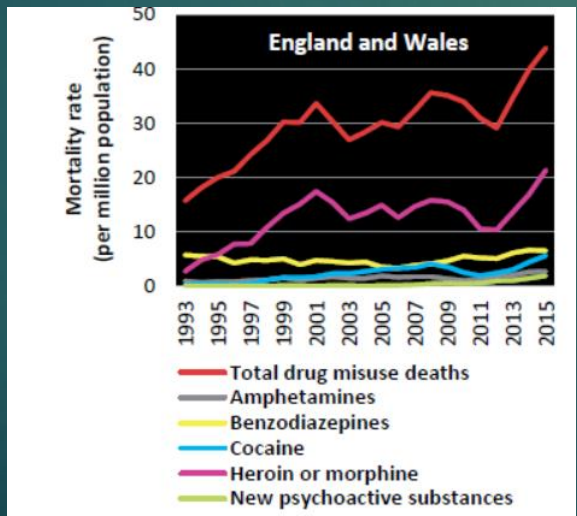
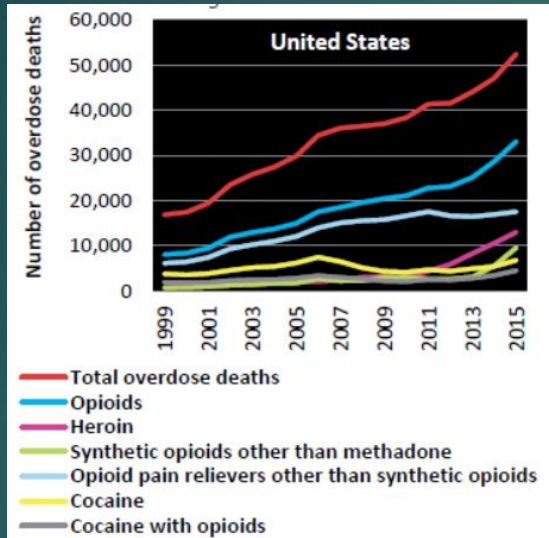
- ▶ Youth/ adolescence - critical development period from childhood to adulthood, aged 14-25 (Oliha, 2014; Akanbi, 2015)
- ▶ Abuse of psychoactive substances begins in adolescence (Akanni & Adayonfo, 2015)
- ▶ Drug abuse – patterned use of a drug in amounts or with methods harmful to self or others (Wikipedia).
- ▶ Drug use disorders – a general term used to broadly define misuse and abuse of drugs
- ▶ Misuse of prescription and over-the-counter (OTC) medicines amongst youths have been reported globally and continue to remain a global public health challenge (Driscoll – Malliarakis, 2009)
- ▶ Non-medical use, misuse, and abuse of drugs - the use of medications without medical supervision for the intentional purpose of getting high, or for some reason other than what the medication was intended (National Drug Policy report, 2008)
- ▶ Substance abuse - self-destructive with health and social consequences
- ▶ However, many of the abused medications have legitimate medical uses

Perspective and prevalence

- ▶ Drug use disorder in 5% of world population; with 25% of drug-related deaths worldwide recorded in the US (World Drug report, 2016).
- ▶ An increase of 6.3% was observed in 2005 in abuse of prescription drugs in youths aged 18- 25 in the US (Lessenger & Fein berg, 2008)
- ▶ Globally, an estimated 190,000 premature deaths majorly due to misuse of opioids (World Drug report, 2017)
- ▶ Regionally, increase in the prevalence of substance abuse across African nations – South Africa, Ghana, Nigeria reported
- ▶ Nigeria: majority of those who abuse psychoactive drugs are the youths (Kobiowu, 2006)

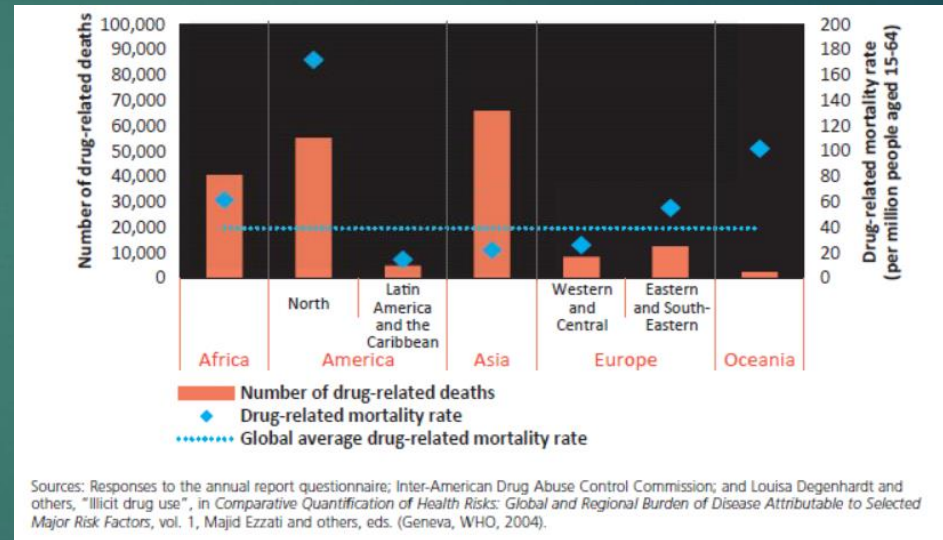
A minimum of 190,000 drug related deaths

Mostly overdoses, mostly opioid-related



Drug-related deaths

Regional variation in drug-related deaths, 2015



Sources: Responses to the annual report questionnaire; Inter-American Drug Abuse Control Commission; and Louisa Degenhardt and others, "Illicit drug use", in *Comparative Quantification of Health Risks: Global and Regional Burden of Disease Attributable to Selected Major Risk Factors*, vol. 1, Majid Ezzati and others, eds. (Geneva, WHO, 2004).

Sources: United States, National Institute on Drug Abuse, National Center on Health Statistics, Centers for Disease Control and Prevention Wide-ranging Online Data for Epidemiologic Research; and United Kingdom of Great Britain and Northern Ireland, Office for National Statistics, "Deaths related to drug poisoning in England and Wales: 2015 registrations", *Statistical Bulletin* (Newport, 9 September 2016).

Prevalence and perspective

- ▶ Nigerian youths are vibrant, full of life, resilient and prone to experimentation and risk-taking (Oliha, 2014)
- ▶ Substance abuse - major risk behaviour among youth, with consequent physical and or mental health complications (Oshodi, Aina & Onajole, 2010)
- ▶ No relation between ethnicity, type of drugs abused or patterns of abuse (Oluwole, Adeleke & Gandonu, 2018)
- ▶ Impact of drug abuse among Nigerian youths has also been associated with the loss of our societal values and ideals culminating in violence, crime (Aluede, 2000)
- ▶ Weak health care system, poor implementation of national drug policy and chaotic drug distribution coupled with poverty, lack of youth empowerment, parents' absenteeism/ neglect, broken homes (Akinyandenu & Akinyandenu 2014; Ogbonna, Ilika & Nwabueze 2015).
- ▶ 46.6% of the sample respondents in a Benin study have at one time or the other used drugs for non-medical purposes with higher proportion of use in males (Adeyemo, 2016).

Types of substances abused

- ▶ Current twin epidemics of codeine and tramadol in Nigeria
- ▶ Prescription drugs: 5 broad categories
- ▶ Opioid analgesics – morphine and its derivatives, tramadol,
- ▶ Sedatives - barbiturates
- ▶ Anxiolytics – benzodiazepines
- ▶ Stimulants - amphetamines
- ▶ Image drugs – anabolic steroids
- ▶ OTC – cough preparations containing codeine, diphenhydramine, dextromethorphan
- ▶ Other commonly abused substances – alcohol, cigarette, caffeine, cocaine, glue,

Heroin and synthetic opioids

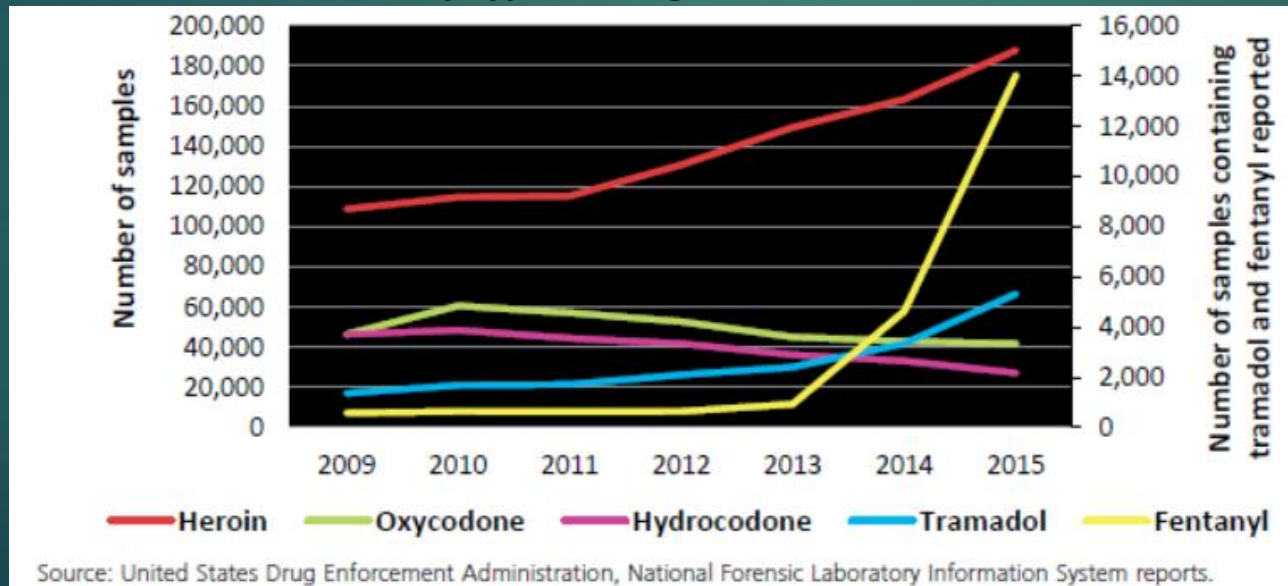
The opioid market is becoming more diversified

Misuse of pharmaceutical drugs

Prescription forgery, diversion, illicit manufacture, counterfeit medicines

Research opioids on the market (NPS)

Number of samples submitted to and analysed by laboratories, by type of drug identified, United States



Associated factors with substance abuse

- ▶ Economic and social factors (WHO, 2000)
- ▶ Experimental curiosity – adolescence (energy burst)
- ▶ Peer influence – 84.7% (Adeyemo, 2016)
- ▶ Parental influence/neglect
- ▶ Ready availability and ease of access – 73.7% (Adeyemo, 2016)
- ▶ Withdrawal syndrome – motivates further abuse

Sources of abused substances

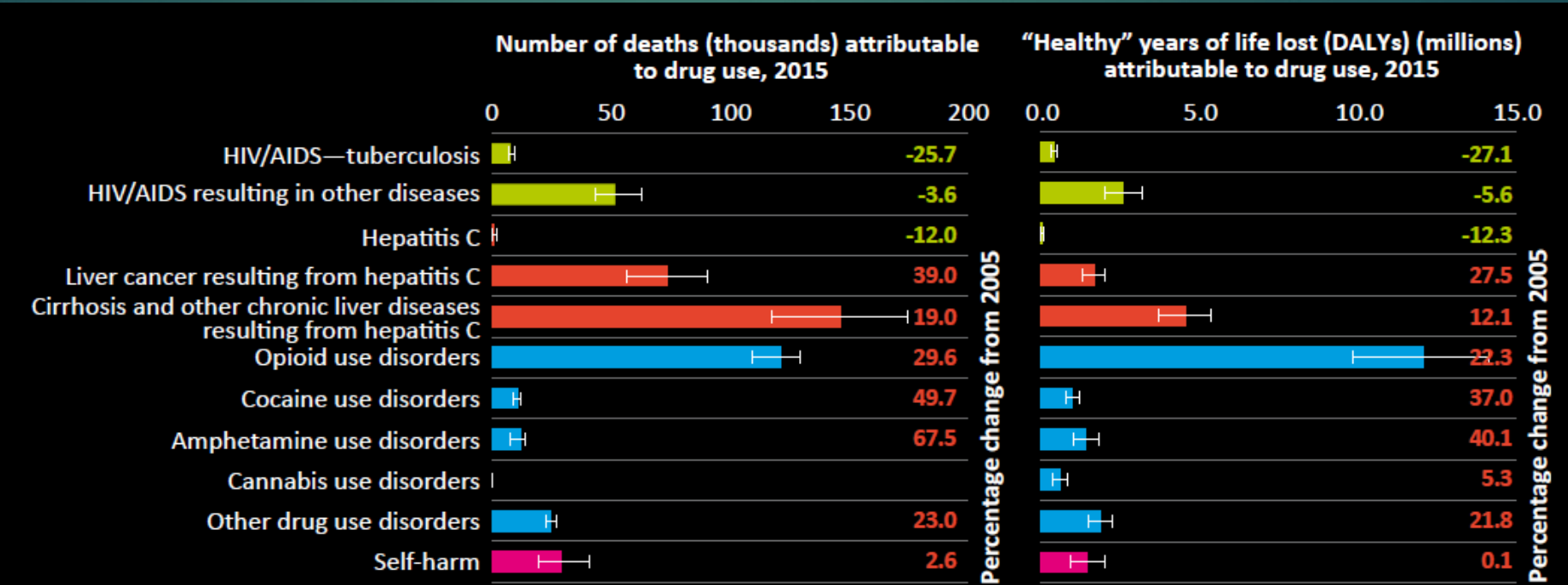
- ▶ Medicine cabinets at home
- ▶ Doctor shopping
- ▶ Ease of access at retail pharmacy and PPMVs
- ▶ Peers/friends
- ▶ Previous prescriptions

Consequences of substance abuse

- ▶ Varied and devastating – individuals, family and nation
- ▶ Medical problems include not limited mental disorder, liver cirrhosis, lethargy, cardio-vascular disorders (DALYs)
- ▶ Social implications – school absenteeism, school drop out, increase in social vices such as crime, robbery, rape, loss of productivity, cultural disorientation, lawlessness

Health related harm

Number of deaths and “healthy” years of life lost (DALYs) attributable to drug use, 2015



Source: “Global, regional, and national comparative risk assessment of 79 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990–2015: a systematic analysis for the Global Burden of Disease Study 2015”.

Notes: Error bars represent uncertainty intervals. Numbers given in charts are percentage changes from 2005.

Drug use disorder prevention and treatment

- ▶ Aim – to prevent or delay the initiation of drug use & transition to drug use disorders
- ▶ Gold standard of opioid addiction care – medication-assisted treatment
- ▶ Cues from other nations' success stories of “no to drugs crusade”
 - Iceland: (alcohol, tobacco) - strengthen preventive/protective factors, reduce risk factors, life skills training, organized activities' participation – sports, arts
 - Portugal: (heroin, cannabis, cocaine) - decriminalizing all drug use, policy reviews & programs that treat addicts, prepare for re-integration into society
- ▶ Long term commitment of government to national project, not only short-term grants funded health programs

Recommendations on substance abuse decline in Nigeria

- ▶ Multi-sectoral collaboration – professional, trade, non-governmental
- ▶ Preventive health education/public health awareness – use of media
- ▶ Increased parental monitoring and supervision
- ▶ Community and religious – vigilante groups, places of worship
- ▶ Youth groups – positive use of peer group influence
- ▶ Government – effective regulatory control and policy implementation, monitoring and evaluation, job creation for unemployed and under-employed, sustained political will to invest in Nigerian youth
- ▶ Adequate data bank and investment in research to provide evidence-based solutions
- ▶ Pharmaceutical industry players – sanitized drug distribution to reduce access: manufacturers, importers, distributors and retailers
- ▶ Adequate prescription monitoring, careful record-keeping of refills
- ▶ Integrated team work involving all healthcare professionals – physicians, psychiatrists, psychologists, pharmacists, nurses, laboratory scientists

Current measures to curb medicines' abuse by pharmacy profession

- ▶ Pharmacists' Council of Nigeria (PCN)
 - Codeine and related substances working group report for implementation before Health Minister in April 2018 (PCN Registry, 2018)
 - Empower regulatory agencies - adequate funding and security
 - Sanitized and better organized distribution in the country – national drug distribution guidelines: mega drug distribution centre
 - Improved data repository to assist improved distribution of medicines – retail pharmacy practice standardisation, PPMVs and hawkers
 - Increased ethical and moral responsibilities – issuance of permits to manufacturers, importers, distributors
 - Economic interest and financial considerations not override health implications associated with substance abuse

Current measures cont'd

- ▶ Pharmaceutical Society of Nigeria (PSN)
- ▶ Recent effort by the PSN seeking implementation of prescription policy to curb drug abuse in the country
- ▶ National & State platforms to enforce stricter controls in prescription filling and improved pharmaceutical care for clients/patients
- ▶ Association of Community Pharmacists of Nigeria (ACPN) – a hearing at the Senate on the distribution and availability of controlled prescription drugs

Conclusion

- ▶ The menace of increased drug abuse in the nation is a harsh reality that did not happen overnight.
- ▶ However, it can be managed and brought under control by multi-sectoral collaborations and gleaning lessons from research and countries that have success stories
- ▶ Youths remain the future of our nation hence investment of this nature in them holds great promise for the next generation, nation and globe at large.

Closing question – is our health system ready to combat this epidemic?

Thank you for
listening

Ilupeju Lagos, 20 June 2018