

# Curbing Adolescent Illicit Drug use in Owerri Metropolis, Nigeria: A Public Perceptive.

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## Research

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# Abstract

**Background:** In order to reduce the rate of illicit drug use, the public has an important role to play, therefore how they perceive illicit drug use among youths must be ascertained. This study, seeks to ascertain public perception on strategies for curbing adolescent drug use.

**Methods:** A descriptive cross-sectional research design was used for the study. The study adopted a mixed method approach comprising quantitative and qualitative methods. The study population consisted of members of the public aged 18 years and above, residing in Owerri metropolis at the time of the study. A total of 10 communities were selected randomly in all: four communities from the 16 communities that make up Owerri West, five communities from the 18 communities that make up Owerri North and one community from the five communities that make up Owerri Municipal. A total of 16 respondents were purposively selected for in-depth interviews.

**Results:** The quantitative findings show that 70.7% of respondents believe that the use of illicit drugs by adolescents can be controlled. The findings also show that one of the ways to control adolescent drug use is to establish stringent anti-illicit drugs consumption laws/policies (20.4%) amongst others. The qualitative findings report that in order to curb the use of drugs by adolescents, the following activities and bodies need to be implored: health promotion, raising more awareness and sensitization campaigns, creation of remand homes for juveniles, the involvement of parents, school authorities and religious organizations and rehabilitation programmes. However, raising awareness, according to the study was reported as a reliable way in eliminating drug use among adolescents.

**Conclusion:** To curb illicit drug use, proper funding of drug enforcement agencies, sensitization campaigns, strict laws on drug prescription, provision and use and health education etc. are very necessary for reducing adolescents' illicit drug consumption.

## Background

The use of illicit drugs is associated with a lot of harmful behaviours and has the tendency to cause both short- and long-term health problems. It is not easy to generalize on what level of use is harmful, however, effects vary by individual and also, there is no standardized dosage for many illicit drugs (1). Adolescents who use illicit drugs are more likely than other adolescents to engage in risky sexual behavior or be involved in delinquency and crime (1). Additionally, students using illicit drugs often have problems in school, although it is not easy to determine which comes first—the drug use, or the school problems (2). These school problems include low attendance, poor academic performance, and a greater likelihood of dropping out or being expelled (3).

Efforts have been made by many concerned organizations and individuals to curb this social problem (4) e.g. the anti-narcotic decree that led to the setting up of the National Drug Law Enforcement Agency (NDLEA), public awareness campaigns, etc. (5). However, despite the efforts that have been made to curb the social problem, there still remains an increasing prevalence of drug use among adolescents (4). Drug

intervention strategies have been seen as a solution-oriented process and are structured, in order to persuade individuals (adolescents) who are abusing drugs to seek help in overcoming their addiction (6). A successful intervention strategy presents an opportunity for an addicted student to accept help in taking the first step toward recovery (6).

In curbing drug use, intervention strategies should involve peer education, schools, non-governmental organizations (NGO) and family (6). Strategies, as mentioned by Mamman, Othman & Lian (5) and Fareo (7) are public awareness campaign, liaison between research and non-governmental organization, designing curricula on drug education, establishing counselling centres for drug control and National Drug Law Enforcement Agency (NDLEA) should also intensify their campaigns on anti-drug. Although very few contextual success stories have been documented such as a clinical trial study by Wagenaar (8) on Communities mobilizing for change on alcohol. This study was a group-randomized trial that implemented and evaluated the organizing efforts of a community to change their policies and practices in order to reduce access to alcohol for youths. The results from the study suggested that a community-organizing approach to limit the access of alcohol to youths, may be effective for some sub-groups.

In order to ensure that the strategies and interventions put in place for curbing drug use among adolescents, witnesses a high success rate, public perception needs to be ascertained. The public's mindset towards the subject matter needs to be put into intervention plans and strategies for curbing drug use. In order to reduce the rate of illicit drug use, the public has an important role to play, how they perceive illicit drug use among youths must be ascertained. Moreover, how the public perceives an issue may reveal the level of attention it gets and the best strategies of addressing it. Because perception is shaped by things such as past experience, cultural expectations, motivations, moods, needs and attitudes (9, 10). Ignoring public perception on issues that require modifying public policy or public behaviour, might result in the failure of technically good innovations (11). This study, seeks to ascertain public perception on strategies to curbing the adolescent drug use.

### *Research questions*

1. Can illicit drug use by adolescents be controlled?
2. Are you aware of any sensitization efforts made in your community?
3. What strategies can be used to curb adolescent drug use?

## **Methods**

### **Study design and study area**

A descriptive cross-sectional research design was used for the study. The study adopted a mixed method approach comprising quantitative and qualitative methods. The area of study was Imo state, and there are 27 local government areas in Imo state. However, only three that make up Owerri metropolis were used for the study. The three local government areas that make up Owerri metropolis include Owerri West,

Owerri North and Owerri Municipal. The choice of this study area arose from the fact that there are undocumented reports of illicit drug use among young people in the region.

## **Study population and selection of study participants**

The study population consisted of members of the public aged 18 years and above, residing in Owerri metropolis at the time of the study. The projected (from the 2006 Nigerian Population Census) figures show that 403,425 people reside in Owerri metropolis. Specifically, Owerri North constitute 176,334; Owerri west constitute 101,754 while Owerri-municipal constituted 125,337.

To ensure that Owerri metropolis' urban and rural communities and their respondents were truly represented in the population, a cluster sampling procedure was adopted. The justification for this is because Owerri metropolis has a considerable land mass and it will be difficult and expensive to cover such a vast area. The 40 communities that comprise Owerri metropolis were represented with numbers and these numbers written on individual pieces of paper, folded and shuffled (selection by balloting). They were selected one after the other randomly until the desired figure was reached. The same procedure was repeated for the three local governments. A total of 10 communities were selected randomly in all: four communities from the 16 communities that make up Owerri West, five communities from the 18 communities that make up Owerri North and one community from the five communities that make up Owerri Municipal. Simple random sampling technique of balloting without replacement was used to determine which communities get picked from the LGAs. Using Taro Yamane formula for determining finite population, using a significance level of 0.04, the sample size for the study was 624. In the four communities that were selected from Owerri West, 200 respondents were randomly selected. In the five communities that were selected from Owerri North, 220 respondents were randomly selected. In the one community that was selected from Owerri Municipal, 204 respondents were randomly selected. Information was collected from students living in off campus hostels, people in offices, markets and people found on the street all of whom meet the age category for the study.

## **Instruments of data collection**

The research instruments used for data collection were questionnaires and in-depth interview guide. The questionnaire contained semi-structured questions. The questionnaire was developed based on the objective of the study. The questionnaire elicited information on the respondents' perception on strategies to curb illicit drug use among adolescents in Owerri metropolis.

The interview guide contained structured questions on adolescent drug use, factors influencing their involvement as well strategies to curb them. A total of 16 respondents were purposively selected for in-depth interviews. Three respondents from a Psychiatric unit at Owerri (a representative of office of the director, a doctor and a nurse), by virtue of their profession as medical and health personnel, the researchers believe that they would be well informed of the issue under investigation. A representative of the social welfare, at Owerri [RepSW], was also selected because it was believed that he would possess knowledge about deviant behaviours of young people in the metropolis. Also, twelve other respondents (four from each LGA) comprising of an elder statesman and woman, youth leaders and other influential

community leaders were selected for the in-depth interview. The rationale for their selection was based on the assumption that they are knowledgeable about the subject matter and how it plays out in their respective communities.

## **Validity and reliability test of the instrument**

The face validation of the instrument was determined by subjecting the instrument to the scrutiny of experts in the field of Sociology from the Sociology/Anthropology of the University of Nigeria, Nsukka. They experts were allowed free hand. The modifications and suggestions made by the experts were incorporated to produce the final copy of the instruments. A pilot study was conducted with 10% of the study sample size respondents chosen randomly from a local government with similar characteristics as the study area in terms of population and structure. The responses were coded and put into the computer using SPSS v21.

## **Data analysis**

The data from questionnaires were collated and coded manually and entries put into the computer. The data was analyzed with the Statistical Package for Social Sciences (SPSS version 21). The analysis employed descriptive statistics such as frequencies and percentages to present the characteristics of the research subjects. In analyzing the qualitative data, the researcher began with careful transcription of the data. The transcripts derived from the in-depth interviews were read and coded with the Nvivo 11 software according to emerging themes. Thematic methods were used in the analysis of the qualitative data. The emerging themes were further grouped into major recurring themes and then analyzed accordingly. Salient illustrative quotes were then pulled out to complement and elucidate the quantitative data in reporting the results.

## **Results**

### **Socio-Demographic data of the Respondents**

Table 1 highlights the distribution of respondents according to their sex, age, educational attainment, marital status and occupation.

Table 1  
Distribution of respondents by their Socio-demographics

<b>Socio-demographics</b>			
<b>Sex</b>	<b>No of Respondents</b>	<b>Percentage (%)</b>	
Male	255	47.7	
Female	280	52.3	
Total	535	100	
<b>Age of respondents</b>	<b>Male (%)</b>	<b>Female (%)</b>	<b>Total (%)</b>
18–27 years	110(43.1)	93(33.2)	<b>203(37.9)</b>
28–37 years	33(12.9)	101(36.1)	<b>134(25.0)</b>
38–47 years	60(23.6)	42(15.0)	<b>102(19.2)</b>
48–57 years	48(18.8)	41(14.6)	<b>89(16.6)</b>
58 years and above	4(1.6)	3(1.1)	<b>7(1.3)</b>
Total	255(100)	280(100)	<b>535(100)</b>
<b>Educational attainment</b>	<b>Male (%)</b>	<b>Female (%)</b>	
No formal education	12 (4.7)	44 (15.7)	<b>56(10.5)</b>
Primary school	22 (8.6)	47 (16.8)	<b>69(12.9)</b>
Secondary school	29 (11.4)	92 (32.9)	<b>121(22.6)</b>
N.C.E*	42 (16.5)	18 (6.4)	<b>60(11.2)</b>
OND/HND**	50 (19.6)	38 (13.5)	<b>88(16.5)</b>
B.Sc./B.Tech.	80 (31.4)	40 (14.3)	<b>120(22.4)</b>
Other (specify)	20 (7.8)	1 (0.4)	<b>21(3.9)</b>
Total	255 (100)	280 (100)	<b>535(100)</b>
<b>Marital status</b>	<b>Male (%)</b>	<b>Female (%)</b>	
Married	64(25.1)	127(45.4)	<b>191(35.7)</b>
Widowed	0(0)	23(8.2)	<b>23(4.3)</b>
Divorced	9(3.5)	10(3.6)	<b>19(3.6)</b>
Separated	19(7.5)	32(11.4)	<b>51(9.5)</b>

\*N.C.E. – National Certificate Examination \*\* OND- Ordinary National Diploma \*\* Higher National Diploma

<b>Socio-demographics</b>			
Single	163(63.9)	88(31.4)	<b>251(46.9)</b>
Total	255(100)	280(100)	<b>535(100)</b>
<b>Occupation</b>	<b>Male (%)</b>	<b>Female (%)</b>	
Unemployed	23(9.0)	42(15.0)	<b>65(12.1)</b>
Trading	77(30.2)	122(43.6)	<b>199(37.2)</b>
Business	145(56.9)	88(31.4)	<b>233(43.6)</b>
Civil service	4(1.5)	26(9.3)	<b>30(5.6)</b>
Other (specify )	6(2.4)	2(0.7)	<b>8(1.5)</b>
Total	255(100)	280(100)	<b>535(100)</b>
*N.C.E. – National Certificate Examination ** OND- Ordinary National Diploma **Higher National Diploma			

## Can illicit drug use by adolescents be controlled?

According to data contained in Table 2, majority (70.7%) of the respondents indicated that adolescents' use of illicit drugs can be controlled 22.4% and disagreed that such behaviour can be controlled while 6.9% don't know whether it can be controlled.

Table 2  
Distribution of respondents on whether the use of illicit drugs by adolescents can be controlled

<b>Can the use of Illicit Drugs by Adolescents be controlled?</b>	<b>Total (%)</b>
Yes	378(70.7)
No	120(22.4)
Don't know	37(6.9)
Total	535(100)

Furthermore, in Table 3, respondents who answered in the affirmative in Table 2 were asked to state the ways through which the use of illicit drugs (e.g., cocaine, weed, etc) by adolescents can be controlled. The data contained in Table 3 shows 20.4% of the respondents indicated anti-illicit drugs and consumption laws/policies, 17.7% suggested demanding identification cards and doctor prescription before selling drugs to adolescents, 13% suggested monitoring the distribution of these drugs, 11.6% educating the young people on the dangers of illicit drugs, 10.3% restricting adolescents' access to illicit drugs, 10.1%

rehabilitation programmes for adolescents who are already addicted, 9.3% before purchase of drugs is made, evidence of prescription, with authorized signature, must be shown and 7.7% economic empowerment and provision of employment opportunities for adolescents.

Table 3  
Ways through which the use of illicit drugs by adolescents can be controlled

<b>Ways through which the use of illicit drugs by adolescents can be controlled</b>	<b>Total (%)</b>
Before purchase of drugs is made, evidence of prescription, with authorized signature, must be shown.	35(9.3)
Educating the young people on the dangers of illicit drugs.	44(11.6)
Restricting adolescents' access to illicit drugs.	39(10.3)
Establishing stringent anti-illicit drugs consumption laws/policies	77(20.4)
Monitoring the distribution of these drugs.	49(13.0)
Economic empowerment and provision of employment opportunities for adolescents.	29(7.7)
Demanding identification cards and doctor prescription before selling drugs to adolescents.	67(17.7)
Rehabilitation programmes for adolescents who are already addicted	38(10.1)
<b>Total</b>	<b>378 (100)</b>

According to the information contained in Table 4, respondents who believed that adolescents' use of illicit drugs cannot be controlled gave the following as reasons, adolescents are comfortable with drugs as a quick fix (40.8%), adolescents are easily influenced by peers to try anything (35.8%) and adolescent exuberance (23.3%).

Table 4  
Distribution of respondents by the reasons why adolescents' consumption of illicit drugs cannot be controlled

<b>Reasons adolescents consumption of illicit drugs cannot be controlled</b>	<b>Total (%)</b>
Adolescents exuberance	28(23.4)
Adolescents are easily influenced by peers to try anything	43(35.8)
Adolescents are comfortable with drugs as a quick fix	49(40.8)
<b>Total</b>	<b>120(100)</b>

# Are you aware of any sensitization efforts made in your community?

The data reflected in Table 5 show that a majority of the respondents (96.8%) were of the opinion that there have been sensitization efforts targeted towards the populace (Owerri metropolis) about the consequences of drug use. On the other hand, very few respondents either expressed a contrary view (0.6%) or said they did not know (2.6%) about such sensitization efforts.

Table 5  
Respondents' awareness of efforts made to sensitize the public about the consequences of drug use

On whether there are sensitization efforts	Total (%)
Yes	518(96.8)
No	3(0.6)
Don't know	14(2.6)
Total	535(100)

The data in Table 6 shows the form of sensitization efforts the respondents are aware of. The following forms of sensitization were identified: didactic drama and plays on the media (25.7%), outreach and outdoor campaigns (24.9%), efforts of religious organizations (21.4%), cues to action (e.g., warnings signs by the Federal Ministry of Health on illicit drugs) (15.8%) and Health education (12.2%).

Table 6  
Distribution of respondents by the forms of sensitization efforts they are aware of

Forms of sensitization efforts	Total (%)
Health education	63(12.2)
Didactic drama and plays on the media	133(25.7)
Outreach and outdoor campaigns	129(24.9)
Efforts of religious organizations	111(21.4)
Cues to action (e.g., warnings signs by the federal ministry of health on cigarette and alcohol)	82(15.8)
Total	518(100)

# What strategies can be used to curb adolescent drug use?

The data contained in Table 7 shows the distribution of respondents on their suggested strategies that can be used in curbing adolescents' use of illicit drugs. Overall, 41.7% of entire respondents suggested that the provision of employment opportunities for youths would reduce adolescents' drug abuse. Other suggestions include, proper funding of drug enforcement agencies (18.9%); strict border control to check drug trafficking (11.9%), sensitization exercise (10.5%); strict laws on drug prescription (8.6%); purchase and use and health education (8.4%) respectively as remedies for reducing adolescents' drug abuse.

Table 7  
Suggested strategies that can be used in curbing adolescents' use of illicit drugs

Suggestions	Total (%)
Strict border control to check drug trafficking	64(11.9)
Sensitization exercise	56(10.5)
Proper funding for drug enforcement agencies	101(18.9)
Health education	45(8.4)
Strict laws on drug prescription purchase and use	46(8.6)
Employment opportunities for youths	223(41.7)
Total	535(100)

Corroborating the above, IDI respondents who were asked to suggest ways of curbing the use of drugs by adolescents suggested the following: health promotion, raising more awareness and sensitization campaigns, more (adequately built and functional) remand homes for juveniles, the involvement of parents, school authorities and religious organizations and rehabilitation programmes. To majority of the respondents, raising awareness still remains a reliable way in eliminating drug use among adolescents. They posited that awareness programmes done with the aim of preventing and not treatment would be particularly effective. They advised that such interventions be targeted towards primary school pupils. One of the respondents indicated that *'catching them young'* should be the main focus as they (pupils) are still malleable and can be discouraged from consuming illicit drugs.

To this end, the respondent advocated for: *"the development of a curriculum for drug education that should be taught at all levels of the educational system, starting from the primary school"* (RepSW). However, for the set of respondents who were skeptical of the tenability of awareness programmes, they suggested the design and implementation of rehabilitation programmes. Although, respondents expressed reservations because such a programme is capital intensive and foreign to the Nigerian environment, they encourage the government to make legislations that could make this innovation a success. As to how religious organization can contribute to this, respondents called on religious figures to

continue to preach against drug abuse and work with drug enforcement agents in dealing with drug issues.

## Discussion

The study sought to ascertain the knowledge base of the public regarding ways of curbing the use of illicit drugs by adolescents. The knowledge base of the public, if ascertained, might be instrumental in informing policies and intervention strategies for curbing adolescents' illicit drug use. The larger society is also adversely affected by the increase in drug use by adolescents. It is therefore imperative that the public plays active roles in identifying strategies that are put in place to curb adolescent drug use. This study identified public perception of strategies for curbing adolescents' illicit drug use. In order for this to work, what they know about the subject matter needs to be documented.

The study found that the respondents believe that the use of drugs by adolescents can be controlled through the following means: firstly, stringent anti-illicit drugs consumption laws and bodies should be established, these bodies will monitor the distribution of drugs that are usually abused. Secondly, before selling drugs to adolescents, identification cards and doctor prescriptions should be demanded from these adolescent. Thirdly, the young people should be educated on the dangers of illicit drug use. Thirdly, young people should be restricted from having access to illicit drugs. Fourthly, for the adolescents who are already addicted, rehabilitation programmes should organized. Ensuring that communities have their own structures that will enforce these can go a long way in curbing this problem, one community at a time (12).

However, there are likely constraints in enforcing the suggested strategies. They include the following: that adolescents have grown comfortable with drugs as a quick fix; they depend on these drugs to distract them from their problems and to feel high (13); there is the issue of peer pressure as adolescents are perceived to be easily influenced by their peers to try anything. Furthermore, amongst the points listed by National Institute on Drug Abuse (NIDA) as ways to assess the level of risk in a community, was the need to assess community awareness of the problem (12). In the current study, respondents are aware of efforts that have been made to sensitize the adolescents on the dangers of illicit drug use. The sensitization efforts they are aware of, take the following forms: didactic drama and plays, outreach and outdoor campaigns, efforts by religious organizations and health education. This finding is in line with reports by NIDA (12) and Bah, (14).

The study also sought to identify the likely strategies for curbing drug use among adolescents in Owerri metropolis. According to the result, the provision of employment opportunities for youths would reduce adolescents' drug abuse. Other strategies are proper funding of drug enforcement agencies, strict border control to check drug trafficking, sensitization campaigns, strict laws on drug prescription, purchase and use and health education. This finding is consistent with findings reported by the International Narcotics Control Board (INCB) (15) which also noted that the phenomenon of drug abuse requires societies to dedicate resources to evidence-based prevention, education and interventions, including treatment and

rehabilitation. This is particularly crucial as research findings clearly show that investment in treatment is cost-effective compared with the cost of untreated and continuing abuse. Research conducted in the United States of America reveals that every \$1 invested in treatment yields a return of between \$4 and \$12 in reduced crime and health-care costs (15). Thus, with regards to the design and implementation of rehabilitation programmes (for the already affected), legislations should be made and appropriate funding put in place with the aim of making all of this a success. That is if the influence of corruption has been diminished.

Raising awareness remains instrumental in eliminating drug use among adolescents and even more instrumental are awareness programmes done with the aim of preventing illicit drug use instead of curing it. Such interventions should be targeted towards primary school pupils because they are still malleable and can easily be discouraged from consuming these drugs. A curriculum should be developed that encourages these to be taught at all levels of the education system (from primary, through to the university) and seasonal community awareness for the out-of-school. This corresponds to the findings of Mamman (5) and Fareo (7). They found public awareness campaign, liaison between research and non-governmental organization, designing curricula on drug education, establishing counselling centres for drug control and intensification of National Drug Law Enforcement Agency (NDLEA) campaigns on anti-drugs as strategies for curbing drug use.

In a report by NIDA (12), in order to get a community to implement research-based prevention programmes, firstly, there should be individual and small group meetings with the aim of attracting support from those with great influence in the community. Secondly, it may be imperative to create a community board comprising of a coalition of key leaders from public- and private-sector organizations. This coalition, according to the report, will hold community wide meetings, create and possibly implement public education campaigns, attract sponsors for a comprehensive drug abuse prevention strategy while also presenting data that will support the need for a research-based prevention programme. However, in the communities of study, there are no coalitions of any sort, with a focus on curbing adolescent drug use or illicit drug use of any kind in the communities involved in this study. Neither are there any reported small group meetings with that attracts support from those with great influence in the communities specifically for illicit drug use menace. With this much disinterest in the communities, it will greatly affect any strategies employed. Therefore, the primary focus of any strategy or intervention by any institution should first seek to build community interest and involvement before anything else (12).

## **Study Limitations**

The study focused only on the strategies. The public's perception on the factors that influence adolescent illicit drug use and the consequences was however, not explored. Although, this has been presented in another version of this paper.

## **Conclusion And Recommendations**

To curb illicit drug use, proper funding of drug enforcement agencies, strict border control to check drug trafficking, sensitization campaigns, strict laws on drug prescription, involvement of parents, purchase and use and health education are very necessary for reducing adolescents' illicit drug consumption.

As a recommendation:

- A greater availability of good educational activities, material and leadership opportunities for adolescents are necessary to keep the adolescents purposefully busy. This would help a great deal towards mitigating adolescents' illicit drug use.
- Government should also set up more rehabilitation centres to aid victims of drug abuse.
- Government should be committed to funding such a programme (due to its capital intensive nature) as it is capable of restoring victims of drug addiction and abuse back to society.
- Also, a social environment should be created which would discourage drug abuse, with the schools and universities educating students on the dangers of drug abuse and the value of life.
- The schools and universities should formulate policies to prevent drug abuse and should also hold seminars for parents and families to alert them early to the symptoms of drug abuse in their children.
- Government can also introduce a drug education curriculum which will target nursery and primary school pupils and above with the aim of dissuading them from illicit drug consumption later in adolescence.
- Furthermore, legislation should be enacted to penalize haulage companies especially transporters who do not implement and enforce procedure to prevent misuse of their facilities by drug traffickers.
- Also, as a measure to combat drug abuse and trafficking, the penalty for drug peddling should be made commensurate with the peddler's profits because profits made by drug pushers far exceed the risk, and that is why many people are going into the business.
- Government and parents/guardians should also ensure a strict control and regulation of media, especially social media contents so as to limit the influence of such environmental factors on adolescents' choice and behaviour with regards to illicit drugs.

## Declarations

### *Ethic Approval and consent to participate*

The study was approved by the ethics committee of the department of Sociology/Anthropology, University of Nigeria, Nsukka. Each participant was given a consent form to sign showing their consent to participate in the study.

### *Consent for publication*

Not applicable.

### *Availability of data and materials*

The datasets used and/or analyzed during the current study are available from the lead author on reasonable request.

### *Competing interest*

The authors declare that there are no competing interests.

### *Funding*

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### *Authors' contribution*

OUU conceived the topic and prepared the first draft. EN guided the creation of the topic and also reviewed and made strategic inputs to the paper, section by section until the final draft. AO and UNP reviewed and made strategic inputs to the paper. All authors read and approved the final manuscript.

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Not applicable.

## **References**

1. Murphey D, Barry M, Vaughn B, Guzman L, Terzian M. Child Trends Adolescent Health Highlight: Use of Illicit Drugs. 2013.
2. McCluskey CP, Krohn MD, Lizotte AJ, Rodriguez ML. Early substance use and school achievement: An examination of Latino, White, and African American youth. *J Drug Issues*. 2002;32(3):921–43.
3. National Center on Addiction and Substance Abuse. Malignant neglect: Substance abuse and America's schools. New York: Columbia University; 2001.
4. Adeyemo Florence O, Beatrice O, Okpala PU, Oghale O. Prevalence of drug abuse amongst university students in Benin City, Nigeria. *Public Heal Res*. 2016;6(2):31–7.
5. Mamman H, Othman AT, Lian LH. Adolescent's and drugs abuse in Nigeria. *J Biol Agric Healthc*. 2014;4(1):5–9.
6. Obiechina GO, Isiguzo BC. Curbing the menace of drug use among secondary school students in Nigeria. *Eur J Res Reflect Educ Sci Vol*. 2016;4(1).
7. Oluremi Fareo D. DRUG ABUSE AMONG NIGERIAN ADOLESCENTS STRATEGIES FOR COUNSELLING. *J Int Soc Res*. 2012;5(20).
8. Wagenaar AC, Murray DM, Toomey TL. Communities mobilizing for change on alcohol (CMCA): effects of a randomized trial on arrests and traffic crashes. *Addiction*. 2000 Feb;95(2):209–17.
9. Severin WJ, Tankard JW. Communication theories: Origins, methods, and uses in the mass media. Longman New York; 1997.

10. Sadaf A. Public perception of media role. *Int J Humanit Soc Sci*. 2011;1(5):228–36.
11. Granger-Morgan M. Public perception, understanding, and values. *Ind green game Implic Environ Des Manag* Ed by Richards, DJ, Natl Acad Press Washingt DC. 1997;200–11.
12. Bierman KL, Hendricks Brown C, Clayton RR, Dishion TJ, Michael Foster E, Glantz MD, et al. Preventing Drug Use among Children and Adolescents Acknowledgments ii National Institute on Drug Abuse. 1997.
13. Ogu UU, Ezumah N, Odii A. Illicit Drug Use by Adolescents: A Public Perception of Influencing Factors in Owerri, Nigeria. 2020;
14. Bah YM. Drug abuse among street children. *J Clin Res HIV AIDS Prev*. 2018;3(3):12.
15. International Narcotics Control Board. Report of the International Narcotics Control Board for 2013 [Internet]. New York; 2014 [cited 2020 May 26]. Available from: [https://www.incb.org/documents/Publications/AnnualReports/AR2013/English/AR\\_2013\\_E.pdf](https://www.incb.org/documents/Publications/AnnualReports/AR2013/English/AR_2013_E.pdf)

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