

EXPLORING DRUG REDUCTION CHALLENGES IN NIGERIA: STAKEHOLDER – CENTERED APPROACH

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Abstract

The devastating consequences of drug abuse in Nigeria have reached alarming proportions, necessitating urgent attention from policymakers, healthcare providers and community leaders. This qualitative study examined stakeholders' perspectives on drug reduction challenges in Nigeria, exploring their experiences, conclusions and recommendations. Stakeholders include healthcare providers, policymakers, law enforcement officials, community leaders and individuals who abuse drugs. This paper explored the effectiveness of drug reduction initiatives challenges and identifies areas for improvement. The paper concluded that a comprehensive approach integrating policy reforms and community engagement is essential for effective drug use reduction in Nigeria. The authors recommended that stakeholders should increase funding for drug reduction initiatives, integrate healthcare services for drug abusers and create community-based awareness and education programmes on drug abuse.

Introduction

Drug abuse is the harmful or hazardous use of substances, including alcohol, illicit drugs, and prescription medications, leading to physical, psychological, or social problems (American Psychiatric Association, 2020). Drug abuse also known as substance use disorder refers to the harmful or hazardous use of substances despite adverse consequences (American Psychiatric Association, 2022). According to the National Survey on Drug use and Health, (2020) approximately 7.4% Americans suffer from substance use disorder. Nigeria's drug use prevalence is estimated at 14.4%, with cannabis, opioids, and cocaine being commonly used substances (National Drug Law Enforcement Agency, 2020). Drug abuse has become an organized criminal activity that undermines the security and development of the country therefore, demands for urgent attention from the government and other stakeholders. Drug abusers that have reached the psychological effect stage will experience the creation of dependence circle and addiction. At this point there should be external interference to reduce drug abuse. Drug abuse persists as a critical public health issue in Nigeria, affecting individuals, families and communities (National Drug Law Enforcement Agency, 2020). Drug abuse is a trending issue in the world; it is not only peculiar to Nigeria, it possesses significant challenges to public health and safety, impacting individuals, families and communities. The global population aged 15-64 years that engage in drug abuse at least once in 2016 was 5.6% (Drug Report, 2019). Drug abuse was most common among those that are in the ages of 25 and 39 years, while the rate of past years

used were lowest among those who were below 24 years of age (Drug use in Nigeria, 2018). John, et al., (2022) opined that, drug abuse prevalence was 45.7%, one in every four students abused substances despite an aggregate risk of awareness level of 94.6%. The country's drug use prevalence is estimated at 14.4%, with cannabis, opioids and cocaine being commonly used substances (National Drug Law Enforcement Agency, 2020).

The prevalence of drug abuse has also exposed larger percentage of Nigerians to many crimes. According to United Nations Office on Drugs and Crime, (2018), drug abuse has been a cause of many adverse behaviours like theft, sex work, shoplifting and assassinations, causing dangers such as sexually transmitted infection, teenage pregnancies, rape, intellectual performance and self-neglect, diseases, mortality, morbidity, brain disorder, incoherent speech, ulcers and many others to self and society at large. Drug reduction strategies have been implemented to mitigate drug-related harm, but their effectiveness depends on stakeholder's engagement and support (World Health Organization, 2014). This qualitative study explores stakeholders' perspectives on drug reduction challenges in Nigeria, examining their perceptions, experiences, and recommendations. Stakeholders include healthcare providers, policymakers, law enforcement officials, community leaders, and individuals who abuse drugs.

Types and consequences of drug abuse

The types of drug abuse include: alcohol abuse, illicit drug abuse (e.g., cocaine, heroin and methamphetamine), prescription drug abuse (e.g., opioids, benzodiazepines) and poly-substance abuse (use of multiple substances) (National Institute on Drug Abuse, 2020). The risk factors are: genetic environmental factors (e.g., peer pressure, availability), mental health disorders (e.g., depression, anxiety) and trauma (e.g., childhood abuse) (Agrawal & Lynskey, 2012). It further stated the prevention and treatments as thus: early intervention, screening and assessment, evidence-based treatments (e.g., cognitive-behavioural therapy, contingency management) and recovery support services. There are various stages of drug abuse namely: initiation (first use), escalation (increased use), maintenance (regular use), withdrawal (physical dependence) and relapse (return to use) (National Institute on Drug Abuse, 2020). Assessment and diagnosis include: screening tools, diagnostic interviews and physical examination. The treatment approaches are: Medication-Assisted Therapy (MAT), behavioural interventions (contingency management) and support groups and family therapy (Beck, et al., 2019). Drug abuse can be prevented and treated by early intervention screening and assessment evidence-based treatments (cognitive-behavioural therapy, contingency management) and recovery support services (National Institute on Drug Abuse, 2020).

Drug abuse has different methods of administration such as: inhalation (breathing in drugs through the nose or mouth (smoking and snorting), injection: using needles to inject drugs into veins, muscles, or skin (heroin, steroids), ingestion (swallowing substances orally e.g., pills, capsules), transdermal: absorbing substances through the skin (patches, creams), vaping (inhalation of substances through e-cigarettes or vape pens e.g., nicotine) (Centers for Disease Control and Prevention, 2020).

The routes of administration include oral: mouth ingestion (pills, liquids), nasal: snorting or sniffing (cocaine, opioids) smoking: inhalation through lungs (tobacco, cannabis), rectal: insertion through the anus (suppositories) and vaginal: insertion through the vagina (e.g., tampons) (Oladimeji, et al., 2018). Drug abuse techniques are: chasing (alternating between drugs to enhance), effects stacking (combining drugs to increase potency), boosting (taking multiple doses to maintain effects) and binging (consuming large amounts in short periods) (Adelekan & Adedokun, 2017). The drug abusers encounter some health consequences such as (cardiovascular, neurological, respiratory problems and mental health, depression, anxiety and suicidal ideation) and social relationships i.e. strained relationships and social isolation (World Health Organization, 2019). They can also be treated through the means of Medication-Assisted Therapy: effective for opioid and alcohol use disorders, behavioural therapies i.e. cognitive-behavioural therapy and contingency management (Substance Abuse and Mental Health Services Administration, 2020).

Concept and types of drug abusers

Drug use disorder affects millions of people globally, with 31.6% of Americans meeting criteria for SUD in 2020 (Substance Abuse and Mental Health Services Administration, 2020). Drug abusers are individuals who excessively use drugs, leading to significant impairment or distress (American Psychiatric Association, 2022). It is characterized by tolerance i.e. need for increased amounts to achieve desired effects (National Institute on Drug Abuse, 2020), withdrawal i.e. physical or psychological symptoms when drug abuse ceases (American Psychiatric Association, 2022), loss of control i.e. unsuccessful efforts to control substance abuse (Substance Abuse and Mental Health Services Administration, 2020), neglect of responsibilities i.e. drug abuse interferes with daily life (National Institute on Drug Abuse, 2020). According to Substance Abuse and Mental Health Services Administration, (2020), substance use disorder (SUD) affects diverse populations, with varying characteristics and needs which include: binge users (characterized by intermittent, excessive substance use), chronic users (engage in prolonged, consistent substance use), poly-substance users (use multiple substances simultaneously or sequentially), injection drug users (use needles to administer substances, increasing risk of blood-borne diseases), adolescent substance users (youth aged 12-17 who use drugs, often with co-occurring mental health disorders), older adult substance users (individuals aged 65+ who use substances, often with co-occurring medical conditions), pregnant drugs users (women who use substances during pregnancy, posing risks to fetal development) and individuals with co-occurring disorders, (drug use comorbid with mental health or medical conditions) (National Institute on Drug Abuse, 2020). The country's drug use prevalence is estimated at 14.4%, with cannabis, opioids, and cocaine being commonly used substances (National Drug Law Enforcement Agency, 2020).

Drug reduction challenges in Nigeria

Drug reduction, a public health approach in Nigeria aimed at reducing the negative consequences of drug abuse, faces numerous challenges that hinder its effectiveness. Despite various interventions from National Drug Law Enforcement Agency (NDLEA) and

stakeholders, drug reduction encounter various obstacles. In an attempt to achieve effective drug reduction, NDLEA and stakeholders experience funding gaps and inadequate resources, stigma and discrimination against drug abusers, limited access to drug reduction services and policy and legislative barriers (United Nations Office on Drugs and Crime, 2019), among others.

Social and cultural challenges

Cultural and social factors, such as peer influence and societal norms, contribute to drug abuse in Nigeria. A study by Odejide, (2006) found that cultural and social factors play a significant role in shaping attitudes towards substance abuse. Social and cultural challenges can be stigma and discrimination. Drug abusers often face social stigma, discrimination and marginalization, making it difficult to access harm reduction services, (Adelekan & Adedokun, 2017). It is difficult to see any client going to rehabilitation centre for help on his or her own; they are mostly dragged there through arrest by NDLEA or through families and friends because of the fear of punitive measures and stigmatization. Stigma and discrimination are significant barriers to seeking help for drug addiction in Nigeria. A study by Oshodi et al., (2010) found that individuals with substance use disorders often face stigma and discrimination, preventing them from seeking treatment.

According to Krendl and Perry, (2023), researchers measures stigma under both Substance Use Disorder (SUD) and mental illness along three dimensions: namely public stigma, that is, the society's negative beliefs towards those that struggle with those disorders. Secondly, self-stigma which is the negative beliefs the individuals has towards themselves. Lastly, structural stigmatizations which are systemic rules, policies and practices that discriminate against individuals with drug disorder.

Several reviews have also shown variation in stigmatization among the types of drugs used. For instance, victims of cocaine and codeine will be more stigmatized as being dangerous than the person that abuses mere alcohol. Various studies highlight the challenges posed by substance use, especially among the youths and the need for comprehensive interventions. Implementing harm reduction measures, such as opioid substitution treatment, syringe access services, and antiretroviral treatment, can significantly reduce new HIV infections among people who inject drugs.

Cultural barriers (cultural and societal norms may view harm reduction as condoning or enabling substance use), lack of community support: insufficient community engagement and support can limit harm reduction program effectiveness, policy and legislative challenges and Prohibitionist Policies (Laws and policies prioritizing punishment over public health hinder harm reduction efforts). Policy reform is crucial for implementing drugs reduction among drug abuse in Nigeria, but unfortunately there is poor coverage and implementation as well as lack of evidence-based approaches (Adebisi, et al., 2019). The current "war on drugs" strategy in Nigeria lacks effectiveness in drugs reduction, urging a shift towards treatment and intervention measures for better outcomes.

Corruption and ineffective law enforcement is another policies and legislative barrier in drug reduction. It poses challenge to drug reduction in Nigeria. According to a report by the International Narcotics Control Board (INCB, 2020), corruption and inadequate

law enforcement capacity hinder efforts to control the trafficking and abuse of illicit drugs. There is corruption in law enforcement, military, customs and correctional services. Negative consequences include economic, crime, human rights and discrimination, (Otu, 2015). The NDLEA's arrest and detention strategies in Nigeria primarily target abusers and street-level dealers, leaving major drug barons untouched, with detainee-reported human rights violations and perceived ineffectiveness. All these can cause ineffectiveness arrest and detention strategies and gross violation of suspects' human rights.

Funding Constraints (limited funding for drug reduction programs restricts service availability and accessibility). Lack of funding and community resistance is another hindrance to effective drug reduction. Inadequate funding for drug reduction initiatives is a significant challenge in Nigeria. A study by Ibrahim et al., (2018) found that insufficient funding for treatment and rehabilitation services hinders the effectiveness of drug reduction efforts availability of drug reduction services in Enugu, Nigeria faces barriers like funding and community resistance. Stakeholders show more acceptance towards specific strategies like methadone replacement (Onu, et al., 2020) but unfortunately, there is limited availability of treatment services. The choice of individual's replacement may not be available, (Ediom-Ubong, & Richard, 2018).

Funding competing priorities (drug reduction competes with other public health priorities for funding), cost-effectiveness (demonstrating cost-effectiveness of harm reduction programs can be challenging) and resource allocation (allocating resources efficiently across harm reduction services is complex) (Lau, et al., 2019) while research and evaluation challenges include methodological limitations (evaluating drug reduction programme effectiveness poses methodological challenges), data quality (collecting accurate, reliable data on harm reduction outcomes can be difficult) and translating research into practice (bridging the gap between research findings and practical implementation). Poverty and unemployment are also underlying factors that contribute to drug abuse in Nigeria. According to a report by the World Health Organization (WHO, 2018), poverty and unemployment increase the vulnerability of individuals to substance use disorders. Regulatory barriers (overly restrictive regulations can impede drug reduction service delivery) and healthcare and service delivery challenges include: limited access to services (geographic, financial and logistical barriers restrict access to drug reduction services). One of the significant challenges of drug reduction in Nigeria is the limited access to treatment and rehabilitation services. According to a report by the United Nations Office on Drugs and Crime (UNODC, 2019), many individuals struggling with addiction lack access to evidence-based treatment, particularly in rural areas.

Inadequate training: healthcare providers may lack training and expertise in drug reduction and service gaps or insufficient services for specific populations (e.g., youth, women) or substances (e.g., opioids). Operational challenges also include sustainability (drug reduction programs often rely on short-term funding, threatening long-term sustainability), scalability (expanding harm reduction services to meet growing demand is challenging) and evaluation and monitoring (assessing program effectiveness and monitoring outcomes can be difficult). This may result to lack of awareness and education. Limited awareness and education about drug abuse and addiction contribute to the

challenges of drug reduction in Nigeria. A study by Adelekan et al. (2014) found that many Nigerians lack knowledge about the risks associated with drug abuse, highlighting the need for education and awareness programs.

Ethical and moral challenges encountered include moral objections (some argue drug reduction enables or condones rehabilitation), conflict with abstinence-based approaches (drug reduction may be seen as contradictory to abstinence-based treatment) and balancing individual rights and public health (drug reduction may raise concerns about individual rights versus collective public health interests), (Burris, et al., 2018).

Stakeholders in initiative against drug abuse

The success of drug abuse reduction initiatives relies heavily on the engagement and support of stakeholders, including drug users, families, community leaders, and healthcare providers (Rhodes, et al., 2019). The factors that influence stakeholders' willingness to engage in harm reduction efforts is crucial for developing effective interventions and improving public health outcomes (Sordo, et al., 2019). Stakeholders Include: healthcare providers (emphasizes the need for increased funding and training, highlights stigma and discrimination against drug abusers), policymakers (recognizes the importance of policy reforms and decriminalization, cited funding constraints and political will as challenges), law enforcement officials (focuses on enforcement and supply reduction, expressed concerns about diversion and misuse of harm reduction services), individuals who abuse drugs (reported stigma, discrimination, and arrest as barriers to accessing services, emphasized the need for accessible, community-based harm reduction programmes) (Adelekan, & Adedokun, 2017).

Intervention and treatment take place in the rehabilitation centre and it has helped a lot of drug abusers to come out of the serious dilemma drugs has put them. Stakeholders play a crucial role in implementing drug reduction strategies. Studies from various regions like Brazil, Finland, South Africa, and the United States highlight the importance of stakeholders' involvement (Ali, et al., 2022). There is need for a shift from solely punitive measures to incorporating drug reduction and treatment approaches. The clients should not be punished out-rightly. There should be second chance as they can still become better persons.

Conclusion

This paper highlighted the complexities and challenges surrounding drug reduction in Nigeria, emphasizing the need for a comprehensive approach that engages stakeholders, addresses policy and legislative barriers and prioritizes community-based initiatives. In addition, this study uncovers critical insights into the complexities surrounding drug reduction in Nigeria. It was revealed that stakeholders across various sectors, including healthcare, policy, law enforcement, community leadership and individuals who abuse drugs, universally acknowledge the importance of drug reduction in mitigating the adverse effects of drug abuse. Addressing these challenges require a comprehensive approach that incorporates increasing access to treatment, reducing stigma, promoting awareness and education, addressing poverty and unemployment and improving funding and law

enforcement capacity are essential for effective drug reduction in Nigeria. Based on various opinions expressed in this paper, the following recommendations are made:

1. Establish a national drug reduction policy framework.
3. Develop and implement evidence-based drug reduction programmes.
4. Provide training and capacity building for healthcare providers
5. Engage communities in drug reduction efforts through awareness campaigns and outreach programmes
6. Allocate sufficient resources to support drug reduction initiatives in Nigeria

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