

## **Determinants of the Effects of Drug Abuse on the Emotional Health of Senior Secondary School Students in the Calabar Metropolis and Calabar South LGA of Cross River State: Implications for Counselling**

**Jennifer Uzoamaka DURUAMAKU-DIM<sup>1</sup>, Christian Obasi AKPA<sup>2</sup>, Obaya Effiong BASSEY<sup>1</sup>, Egor Eyeng EGWU<sup>1</sup>, and Charles Uzoma IHEANACHO<sup>3</sup>**

<sup>1</sup>Department of Guidance and Counselling, University of Calabar

<sup>2</sup>Department of Community Medicine, Alex Ekwueme Federal University Teaching Hospital, Abakiliki, Ebonyi State.

<sup>3</sup>Department of Public Administration, Imo State Polytechnic, Omuma, Orlu NIGERI

### **Abstract**

*This paper examined the determinants of the effects of drug abuse on the emotional health of students in Calabar Metropolis and Calabar South Local Government Area (LGA) of Cross River State, Nigeria. Three research questions were asked, and three corresponding null hypotheses were tested. Literature was reviewed according to the sub-variables used in the study. An ex-post facto research design was adopted for this study. The population of the study comprised all Senior Secondary School two students of the 2022/2023 academic session in public Secondary Schools in Calabar Metropolis and Calabar South LGA of Cross River State Nigeria. Four hundred and fourteen (414) respondents were selected from the population of 4822 for the study. A self-developed and validated Influencers of Drug Abuse and Emotional Health Questionnaire (IDAEHQ) designed by the researchers was used to collect data. The instrument was trial tested for reliability and results obtained showed a reliability index between 0.71 to 0.91 which was considered high enough to justify the use of the instrument. The independent t-test was the test statistics used for data analysis at a .05 level of significance. The results of the analysis revealed that the emotional health of students with peer influence on drug use is significantly different from those without peer influence on drug use. Also, the emotional health of students with parental influence on drug use is significantly different from those without parental influence on drug use. The Emotional health of students with community influence on drug use is significantly different from those without community influence on drug use. Based on the results of the findings, recommendations were made on the need for the inclusion of drug education in the secondary schools' and tertiary institutions' curricula. This will make adolescents aware of the effects of taking drugs. The Government should plan and organize workshops and Symposia from time to time in secondary schools and villages to advise adolescents on how to use drugs. Being that adolescents abuse drugs because they see them advertised on television, the Government through the health authorities should censor advertisements before they are carried over the air.*

**Keywords:** Community, Determinants, Drug Abuse, Emotional Health, Influencers, Pressure, Peer and Parents

### **Introduction**

Cognitive, perceptual, behavioral, emotional, psychological, and social well-being are all constituents of mental health. Mental also influences an individual's coping mechanisms,

social interactions, and decision-making abilities. A vital component of the educational system is the emotional well-being of adolescents in classrooms. In the end, emotionally healthy pupils are better able to collaborate, make decisions, and form connections. Thus, Denwigwe and Okoli (2018) revealed that cultural competence would impart effective communication skills, an awareness of individual differences among students, and the need for respect for one another. This will support the ability to collaborate, make decisions, and form connections. As students transition into adulthood, these beneficial consequences assist them individually as well as in the greater community. Sadly, most school-age children are overcome with feelings of rage, emptiness, frustration, helplessness, inadequacy, fear, guilt, and loneliness. During the teaching and learning process, students in Calabar Metropolis go through a range of emotions, such as happiness, fatigue, disappointment, anxiety, and wrath. The negative academic emotions of teenagers are associated with a significant arousal of negative emotions, according to Dong and Yu (2017) and Denwigwe (2015).

Since the beginning of human history, people have found ways to alter their bodies and their consciousness by taking substances such as herbs, alcohol, and drugs. These practices have led to many important contributions to science and culture, prominent among them being the development of modern medicine, the medical profession, and the making of fine wines and liquors (Esuabana, 2019). Some religions have found uses for mind-altering drugs to aid communion with the divine principle. For all the positives that mind and body-altering substances have brought us, one fact is clear, they have always been unable to restrict their uses of mind and body-altering substances to culturally prescribed limits, and they have fallen into the trap we know today as addiction. This is why integrating character education into the school curriculum and school culture leads to the production of a crop of learners with desirable values (Denwigwe & Ezekwe, 2019). Addiction usually does not happen overnight, rather, people who become addicted to drugs (such as alcohol, Cocaine, heroin, marijuana, etc.) are gradually introduced and desensitized to them over time. They may initially enjoy the use of drugs in a recreational sort of way.

To ease the tension of the day, for example, someone may develop the habit of unwinding with a beer or glass of wine after work, while another person might start using cocaine to stay up late while studying for an examination. Someone else might use marijuana occasionally to enjoy special moments with friends or as a tool to appreciate cuisine, music, or sex. Some people may continue to use drugs for some time, while others may not be as fortunate. These unfortunate people start using drugs (some gradually, some immediately), and they pay more and more attention to the idea of getting high, buying drugs, making drugs, and using drugs until it becomes a habit.

A drug could be defined as any substance other than food that by its chemical nature affects the structure or functions of the living organism. To medical practitioners, a drug is any type of substance used as medicine in the treatment of physical or mental disease (Eneji, Petters, Esuabana, Onnoghen, Udumo, Ambe, Essien, Unimna, Alawa, & Ikutal, 2022). Nwoli (2015) defined a drug as a substance that by its chemical nature affects the structure or function of the organism. The mode of action and the nature of the effect are the subject matter of pharmacology (the science of drugs). It includes medicine, over-the-counter drugs, illegal drugs, drugs that are commonly referred to as beverages or cigarettes, food additives, pollutants, and food itself. Furthermore, a drug is any type of plant or animal origin, or a mixture of substances used in diagnosis, abnormal physical

state, or symptoms of disease in man or animal. From the above definitions of drugs, one can say that there is nothing wrong with the appropriate use of drugs. Subscribing to this idea, Anderson (2015) asserted that drugs are neither dangerous nor harmful, they are indispensable to modern medicine as they are used all over the world to alleviate pain and restore health. It is when drugs are abused that they cause havoc, misery, and crime. Substance abuse therefore refers to a situation whereby drugs are used indiscriminately against expert advice. Drug abuse can also be defined as inappropriate use of drugs. It is an indiscriminate use of drugs, for non-medical purposes (Alabi, 2014). Furthermore, drug abuse is defined as the compulsive, chronic use of mood-altering drugs whether licit or illicit.

The commonly abused drugs according to Kamarulzaman and Jodi (2018), include alcohol, nicotine, hypnotics like coffee, tea, kola-nuts, and cocaine, hallucinatory drugs like marijuana and narcotics, and others. They include opium and related analgesic compounds, general central nervous system stimulants, and psychedelic drugs. Drug abuse has become a cankerworm that has eaten deep into the fabric of society, so much so that there is hardly any Government or regime that does not embark on one form of public campaign or the other to check it. The campaign mounted by the Government and its agencies seems to have been ignored by the drug users and traffickers. Hence some Governments in Nigeria introduced draconian laws to check drug abuse as well as drug trafficking among citizens, for instance, Buhari and Idiagbon (1983) introduced the death penalty for drug trafficking in Nigeria.

Therefore, the use of drugs by adolescents and underage children (the young ones) should be taken seriously. Denwigwe and Akpama (2013) revealed that the effect of self-esteem on various behaviours of youths cannot be overemphasized and that students' outlook on life is traceable to their level of self-esteem (which can affect their level of involvement in drug use). This is because early use of psychoactive substances may result in addiction, which may lead to brain damage. Substances like alcohol, marijuana, cigarettes, heroin, cocaine, etc. tend to destroy the future of these young ones. It can also lead them to some unusual behaviours like commercial sex hawking, armed robbery, cultism, and so on. These may result in some sexually transmitted diseases like Herpes, Gonorrhoea, Syphilis, HIV (Human Immune Virus), etc. Some become addicted to the extent that they drop out of school. Some adolescents who abuse drugs tend to perform poorly academically. Some are at risk of unwanted pregnancies; some commit abortion, while some deliver and abandon their babies.

The issues of peer pressure, parental influence, and community influence also come to mind. These are common among adolescents, especially those in secondary schools and tertiary institutions. Due to their tender age and limited experience, young people are prone to trying anything. Jung (2021) opined that peer group pressure tops the list of reasons given as to why youth abuse drugs. Kalunta (2017) reported during the launch of the campaign against drug abuse in Lagos that the problem of drug abuse has reached a stage where it is necessary to arouse the awareness of the general populace to the menace. She stressed that if Nigerians did not revolt against drug abuse, and its cancerous effects spread, it might be their children, parents, relations, or friends that would be the next victim. The then Minister of Social Development Youth and Sports, Murshefi (2015) reported that his ministry was involved in the campaign because a great number of abusers of drugs were young men and women. These categories of citizens he said were the responsibility of his ministry. The researchers identified reasons for taking drugs as relief from boredom and stress, feelings of rejection, need for love, ignorance, and curiosity. The

study, therefore, stressed that the fight against drug abuse and illicit trafficking would amount to nothing without the collective efforts of individuals, families, parents, teachers, schools, religious bodies, and voluntary organizations.

The question bugging the minds of the researchers is, what are the determinants of drug abuse? For this research, the determinants were based on Peer influence, Parental influences, and Community influences. Schaffrath and Mankertz (2016) agreed that the influence of peers was a prime reason for people to start using drugs. Denwigwe and Ezekwe (2019) as well as Coleman (2020) discovered that peers try to initiate new members into the group's acts using sweet but unfounded words about the importance of drugs. During adolescence, youth begin to seek more autonomy and begin to spend more time with their peers. Research has consistently identified peer substance use as a predictor of adolescent drug use. Peers have been identified as a central, if not the most important, risk factor in adolescent use of both legal and illegal drugs. Another important risk factor is that adolescents agree with their peers' attitudes toward alcohol use. Furthermore, in adolescents, group 'membership identification' is centrally desired by drug use or non-drug use (Denwigwe & Ngwu, 2019). The strong correlation relationship between adolescent and peer alcohol use supports the argument of social cognitive and learning theory.

Again, parenting practices and the degree of bonding between children and parents also affect adolescent alcohol abuse. Elliot, Huizina, and Ageton (2015) found that slightly over 40 percent of children abusing drugs had alcoholic parents, usually the father. This finding proved that children of alcoholic parents who had been adopted by non-alcoholic foster parents still had nearly twice the number of alcoholics as a control group of adopted children whose real parents did not have a history of alcoholism. In another study, Godwin, Schussing, Miller, Hermansen, and Winoker (2023), compared the sons of alcoholic parents who were adopted in infancy by non-alcoholic parents. Both adopted and non-adopted sons later showed evidence of a high rate of alcoholism – 25 percent and 19 percent respectively. They found that the likelihood of their becoming alcoholics turned out to be no greater than that of the control group of 25 children of non-alcoholic parents. More so, the community that a family resides in also plays a substantial role in shaping adolescent behaviour. Neighborhood influences have been found to affect adolescent behaviours more than parents. Gordon (2015) advanced some reasons for the increased drug use and smoking habits of adolescents. Among the reasons were affluence, rock music, television advertisement, competition, and risk-taking behaviour. From the catalogue of reasons, he concluded that smoking and drug use were social phenomena. Mrug and Windle (2019), listed other reasons like lack of parental care and guidance, curiosity, and lack of proper understanding of the effects of drugs on physical, psychological, and emotional well-being. Accordingly, parents know their children's friends, the parents of their friends, and other adults and children in the neighborhood. There is then a collaborative effort to control and socialize children in the neighborhood. It is proposed that variance will remain low if adults in the community take responsibility for monitoring and correcting all children in the community. In analyzing their results, Pettit, Bates, Dodge, and Meece (2019) found that high levels of problem behaviours were associated with an increased frequency of unsupervised activity with peers, lower levels of monitoring, low neighborhood safety, lower socio-economic status, single-parent status, and male children. It was found that the behavioural problem scores of these high-risk adolescents were reduced significantly when parental monitoring was increased. This

suggests that supervision is negatively correlated to adolescent behavioural problems and is thus the proper venue for intervention.

From the above instances of drug abuse and its impending consequences, one is not left in doubt as to the magnitude of its concern by the nation. The issue is viewed seriously because the chief culprit and victims are the youth (adolescents) who are the main architects of the nation's future. It is imperative, therefore, that the war against crime in society should begin with fighting the use of hard drugs by our youth as people were likely to be law-abiding, avoiding crime if they were prevented from abusing hard drugs. Denwigwe and Okoli (2018) suggested the need for counsellors to render culturally competent services for appropriate guidance of youths (to imbibe quality behaviours). Thus, the motivation to investigate the determinants of drug and emotional health among the students of Calabar Metropolis as well as counselling implications were conceived by the researchers.

**Statement of the Problem** The prevalence of negative, poor, and unhealthy emotional health issues among students is a global concern. Initiatives to manage it and promote positive social, emotional, and behavioural attitudes and school functioning among students have been at the heart of it. According to the Centre for Disease Control and Prevention (2018), the prevalence of emotional health problems among students was approximately 10 percent. Poor emotional health can weaken one's immune system. This makes one more likely to get colds and other infections during emotionally difficult times. Also, when one is feeling stressed, anxious, or upset, one may not take care of his or her health as well as he or she should.

Furthermore, the Ministry of Health reported that in 2015, the number of emotional illness cases among children aged 16 to 19 years was 29.2 percent, an estimated 4.2 million students (Kamarulzaman, & Jodi, 2018). Using school locations, 74 percent of the cases were found for rural students being three times higher than those of urban students. Several causes have been attributed to poor emotional health issues around the world. Some of them are child abuse, poverty, war, physical and verbal abuse, neglect, drug abuse, and poor accessibility to professional medical services. However, this study is undertaken to find out if drug abuse is responsible for students' emotional health in Calabar Metropolis, Cross River State, Nigeria.

**Purpose of the study.** The purpose of this research paper is to examine the determinants of drug abuse and emotional health of students in Calabar Metropolis and Calabar South L.G.A. of Cross River State. Specifically, the research sought to: (a) investigate peer group influence on drug use and emotional health of students in Calabar Metropolis. (b) determine parental influence on drug use and emotional health of the students in Calabar Metropolis. (c) examine community influence on drug use and emotional health of students in Calabar Metropolis.

**Statement of hypotheses** The following hypotheses were formulated. (a) The emotional health of students with peer influence on drug use is not significantly different from those without peer influence on drug use. (b) The emotional health of students with parental influence on drug use is not significantly different from those without parental influence on drugs. (c) The emotional health of students with community influence on drug use is not significantly different from those without community influence on drug use.

## Research Methodology

**Research Design** The research design for the study was the ex post facto research design. It is a design where the researcher has no control over the independent variable because their manifestations have already occurred.

**Population/Sample of Study** The population of this study consists of all the senior secondary school two students in Calabar Municipality and Calabar South Local Government Area of Cross River State, Nigeria (SS 2 students) which according to Cross River State Secondary Education Board (2021), was four thousand, eight hundred and twenty-two (4822) students from the thirty-two (32) public secondary schools in Calabar Municipality and Calabar South Local Government Area of Cross River State, Nigeria.

**Sampling Technique and Sample** A stratified random sampling technique was employed in this study. The stratified sampling was employed considering the heterogeneous nature of the students in terms of schools. This sampling technique reduced sampling error as it enabled the researcher to identify and consider the heterogeneous characteristics of the population while drawing the sample. The sample of this study comprised four hundred and fourteen (414) senior secondary school II students who were randomly selected from eighteen (18) public secondary schools in Calabar Municipal and South LGAs of Cross River State. The sample comprised both male and female students who were drawn from the SS II students. The sample distribution is shown in Table 1.

TABLE 1: SAMPLE DISTRIBUTION BY SEX

S/N	Name of schools	Boys	Girls	Total	
Calabar Municipality LGA					
1.	Govt Girls College, Biq Quo	12	11	23	
2.	State Housing Sec School	8	15	23	
3.	Margaret Ekpo Sec Sch	9	14	23	
4.	NYSC Sec Sch	13	10	23	
5.	Govt Tech Sch, Ikot Ansa	17	6	23	
6.	Govt Sec School, Akim	13	10	23	
7.	Govt Sec Sch, Federal Housing	12	11	23	
8.	Govt Sec Sch., Akai Efa	9	14	23	
9.	Govt Sec Sch., Nyangasang	11	12	23	
10.	Govt Sec sch., Ekorinim	7	16	23	
11.	Govt Comp. High Sch, Taabaa	14	9	23	
12.	WAPI	16	7	23	
	Total		141	135	276
Calabar South LGA					
13.	Govt Science Sch., Atu	12	11	23	
14.	Govt Sec Sch, Idang	14	9	23	
15.	Govt Sec School., Henshaw Town	13	10	23	
16.	Duke Town Sec School	7	16	23	
17.	Govt Sec School, Anantigha	8	15	23	
18.	Govt Sec Sch.,	9	14	23	
	Total		63	75	138
	Sample		204	210	414

**Instrumentation** To enable the researchers to gather information on the determinants of drug abuse and the emotional health of students in the study area, a fixed response questionnaire titled "Influencers of Drug Abuse and Emotional Health Questionnaire (IDAEHQ)" was used. For the respondents, a four-point rating scale that requested the respondents to indicate their level of agreement- Strongly agreed, Agreed, Disagreed, and Strongly disagreed were used. Respondents were required to indicate their opinions by ticking (√) in the appropriate box as provided in the questionnaire. The total score was obtained to give the individual's standing on the variable attribute being measured.

## Data Analysis and Results

**General Description of Research Variables** The study was aimed at examining the determinants of drug abuse and emotional health of students in Calabar Metropolis and Calabar South L.G.A. of Cross River State, Nigeria. 414 questionnaires were administered and retrieved after administration. The independent variable of this study was determinants of drug abuse which was categorized as follows: peer influence, parental influence, and community influence. The dependent variable in this study is the emotional health of students which was measured continuously.

Data gathered from the exercise were subjected to analysis using version 21.0 of the Statistical Package for Social Sciences (SPSS). The results of the analyses were reported in this section. The descriptive statistic of the variables is presented in Table 2. The mean and standard deviations of the major variables are calculated and presented in Tables 3, 4, and 5. A total sample of four hundred and fourteen students was used for the study.

**TABLE 2:** DESCRIPTIVE STATISTICS OF THE DETERMINANTS OF DRUG ABUSE AND EMOTIONAL HEALTH OF STUDENTS (N=414)

Variable	Category	n	$\bar{X}$	SD
Peer Influence	High	245	22.55	4.25
	Low	169	17.26	5.12
Parental Influence	High	246	22.10	4.66
	Low	168	17.87	5.19
Community Influence	High	312	21.50	4.95
	Low	102	16.99	4.89
Emotional Health Total		414	21.06	6.30

**Presentation of results** This section covered the analysis of data based on each hypothesis formulated for the study. This was followed by an interpretation of the results and a discussion of the findings. The hypotheses were tested at a 0.05 level of significance.

**Hypothesis one:** The emotional health of students with peer influence on drug use is not significantly different from those without peer influence on drug use. The dependent variable in this hypothesis was emotional health while the independent variable is peer pressure on drug use. The scores obtained from the respondents were split into two categories of peer pressure. To test this hypothesis, the two categories of peer pressure

were compared with emotional health using an independent t-test. The results of this analysis are presented in Table 3.

**TABLE 3: INDEPENDENT T-TEST ANALYSIS OF THE INFLUENCE OF PEER INFLUENCE ON DRUG USE ON THE EMOTIONAL HEALTH OF STUDENTS (n = 414).**

Peer Influence value	n	$\bar{X}$	SD	t-cal	P-
High Peer Influence	245	22.55	4.25		
				11.428	.000
Low Peer Influence	169	17.26	5.12		

Significant at 0.05 level, df= 412, critical t= 1.96

The Independent t-test of the influence of peer influence on drug abuse on the emotional health of students was carried out to compare the two groups of peer influence on drug abuse. As presented in Table 3, the calculated t-value of 11.428 was found to be greater than the tabulated t-value of 1.96 at a 0.05 level of significance with 412 degrees of freedom. The table also revealed that the mean emotional health of students under high peer influence on drug abuse was greater than those from low peer influence on drug abuse. Therefore, the null hypothesis which states that the "Emotional health of students with peer influence on drug abuse is not significantly different from those without peer influence on drug abuse " is rejected (t-cal= 11.428; P= .000). This result implies that students with a high level of peer pressure on drug abuse significantly differ from those with a low level of peer pressure on drug abuse in their emotional health.

**Hypothesis two:** The emotional health of students with parental influence on drug abuse is not significantly different from those without parental influence on drugs. The dependent variable in this hypothesis is emotional health while the independent variable is parental influence on drug abuse. The scores obtained from the respondents were split into two categories of parental influence on drugs. To test this hypothesis, the two categories of parental influence were compared with emotional health using an independent t-test. The results of this analysis are presented in Table 4.



**TABLE 4:** INDEPENDENT T-TEST ANALYSIS OF THE INFLUENCE OF PARENTAL INFLUENCE ON DRUG ABUSE ON THE EMOTIONAL HEALTH OF STUDENTS (**n = 414**).

Parental influence value	n	$\bar{X}$	SD	t-cal	P-
High parental influence	246	22.10	4.66		
				4.23	.000
Low parental influence	168	17.87	5.19		

Significant at 0.05 level, df= 412, critical t= 1.96

Table 4 presents the independent t-test analysis of the influence of parental influence on drugs on the emotional health of students in Calabar Metropolis. The analysis revealed that the calculated t-value of 4.23 was found to be greater than the tabulated t-value of 1.96 at a 0.05 level of significance with 412 degrees of freedom. The table also revealed that the mean emotional health of students under high parental influence on drug abuse was greater than those under low parental influence on drug abuse in students' emotional health. Therefore, the null hypothesis which states that the " Emotional health of students with parental influence on drug abuse is not significantly different from those without parental influence on drug abuse " is rejected (t-cal= 4.23; P= .000). This result implies that students with a high level of parental influence on drug abuse significantly differ from those with low parental influence on drug abuse in their emotional health.

**Hypothesis three:** The emotional health of students with community influence on drug abuse is not significantly different from those without community influence on drug abuse. The dependent variable in this hypothesis is emotional health while the independent variable is community influence on drug abuse. The scores obtained from the respondents were split into two categories of community influence on drug abuse. To test this hypothesis, the two categories of community influence on drug abuse were compared with emotional health using an independent t-test. The results of this analysis are presented in Table 5.

**TABLE 5:** INDEPENDENT T-TEST ANALYSIS OF THE INFLUENCE OF COMMUNITY INFLUENCE ON DRUG ABUSE ON STUDENTS' EMOTIONAL HEALTH (**n = 414**).

Community influence value	n	$\bar{X}$	SD	t-cal	P-
High community influence	312	21.50	4.95		
				8.005	.000
Low community influence	101	16.99	4.89		

Significant at 0.05 level, df=412, critical t=1.96

Table 5 presents the independent t-test analysis of the influence of community influence on drug abuse on students' emotional health. The analysis revealed that the calculated t-value of 8.005 was found to be greater than the tabulated t-value of 1.96 at a 0.05 level of significance with 412 degrees of freedom. The table also revealed that the mean emotional health of students under high community influence on drug abuse is greater than those from low community influence on drug abuse. Therefore, the null hypothesis which states that the " Emotional health of students with community influence on drug abuse is not significantly different from those without community influence on drug abuse " is rejected (t-cal= 8.005; P= .000). This result implies that students with high-level community influence on drug abuse significantly differ from those with low community influence on drug abuse in their emotional health.

**Discussion of results** The result in Table One contradicts the null hypothesis as the finding shows that there is a significant effect of peer group influence on drug abuse which leads to the emotional health of adolescents. The finding is in line with the assertion of Elliot, Huizina, and Ageton (2015), that peers have a direct and indirect influence on adolescents' drug use by modeling drug use, shaping norms, attitudes, and values surrounding drug use, providing opportunities for use, access to use. Also, in the adolescent group, membership identification is centrally desired by drug use or non-drug use (Eneyo et al, 2022), The strong correlation relationship between adolescents and peer alcohol use supports the argument of social cognitive or learning theory.

According to Harden, Hill, Turk Heimer, and Emery (2018), there is a normative increase in deviant behavior during adolescence. Therefore, most peer groups will expose adolescents to problematic behaviours. Table 2 also reveals that the null hypothesis is rejected. The result of the finding shows that parental influence on drug abuse affects the emotional health of adolescents. This supports the findings by Petit, Bates, Dodge, and Meece (2019) which asserted that parents act as role models and set normative standards for their children. They further stress that their influence is the strongest while children are young.

Kandel (2016), posited that parental modeling has a significant impact on adolescent behaviours. Adolescents not only model after delinquent behaviours, but they also model after their Parent's delinquency and drug use, parental drug use is associated with the initiation of drug use by adolescents. Thus, modeling is reliant on parental behaviours and norm-setting, cognitive/learning theory. The family unit also affects the power of parental influences (Petit, Bales, Dodge & Meece, 2019). Structural deficiencies, for instance, single-parent households, and functional deficiencies, such as decreased parental involvement, serve as indirect influences on affiliation with deviant peers. Family conflict has also been shown to increase the risk of delinquency and illegal drug use. This further supports the social control theory's position that disorganized families have negative consequences on adolescents' behaviour and this results in weakened bonds to society.

Esuabana (2019) also posited that parental practices and the degree of bonding between children and parents also affect adolescent alcohol use. Family management practices marked by poor monitoring of behaviour, unclear expectations for behaviour, few and inconsistent rewards for positive behaviour, and excessively severe and inconsistent punishment for unwanted behaviour increase the risk of adolescents abusing drugs. This is explained by reported parental trust, warmth, and involvement when there is an increased risk for the initiation of drug use.

Finally, in Table Three, the null hypothesis was contradicted as the result of the analysis shows that community influence on drug abuse affects adolescents' emotional

health. Kandel, (2016), asserted that the community that the family resides in also plays a substantial role in shaping adolescent behaviour. He further stressed that neighborhood influences have been found to affect adolescent behaviours more than parents. According to Kandel, Community functions as either open or closed networks. According to social control theory and ecology of human development theory, closed networks boost the development and enforcement of social norms, which in turn 'limit adolescents' involvement in deviant activities. However, in open networks there is a lack of interaction between parents and children, and between parents and other adults abuse in the community. The low level of interaction results in diminutive levels of communities which provide children with increased opportunities to develop anti-social behavior.

Mrug and Windle (2019), posited that adolescents living in neighborhoods with low social control and low social cohesion associate with more deviant friends and engage in more problem behaviour. They also suggest that social control, not social cohesion, has stronger effects on parenting, child behaviour, and peer groups in the community. In support, Kandel (2016) claimed that neighborhood influences superseded parental characteristics, the highest level of problem behaviours was seen in children who were closely monitored but living in the higher-danger neighbourhood.

### **Conclusion and Recommendations**

The following recommendations have been made considering the findings of this study.

(a). A prominent discovery made in this study is that young students or adolescents are the largest groups that abuse drugs to overcome shyness and have a sense of belonging among their peer groups, and because they see them being advertised on television, the researchers find it necessary to call for an inclusion of drug education in the secondary school and tertiary institutions curriculum. This will make adolescents aware of the effects of taking drugs. (b). The government should plan and organize workshops, and symposia from time to time in the secondary schools and villages to advise adolescents on how to use drugs. (c) Since adolescents abuse drugs because they see them advertised on television, the Government through the health authorities should censor advertisements before they are carried over the air. (d) . There is also a need for the Government to control the distribution of drugs to curtail indiscriminate sales to ensure adequate quality of market drugs. (e) The government's reliance on the tobacco and alcohol industries for revenue should be reconsidered since this indirectly encourages the production of these products and therefore the expansion of their industries. (f) Guidance Counsellors should be provided in all the schools and village squares as they are properly suited to handling the personal social problems of adolescents which at times predispose them towards drug abuse. (g)To solve the problem of peer influence on drug abuse, public enlightenment campaigns should be jointly organized by the Government, parents, Guidance Counsellors, and public-spirited individuals on the need to avoid the company of peers who are into drug abuse and every other vice.

*Implication for Counselling* (a) Guidance counsellors together with social welfare agencies should devise means of implementing and consolidating effective substance usage frameworks that will stop students from abusing drugs. (b) Counselling should be given to students within the same age bracket on the need to desist from tramadol usage. (c) Guidance counsellors in collaboration with school administrators should create and monitor school clubs that will educate students on the negative effects of alcohol usage. (d) Counsellors and public health workers should set up a panel to checkmate tobacco usage among young people in various communities. (f) Counsellors and necessary

stakeholders should set up a campaign against the usage of marijuana by parents or guardians.

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### **Biographical Notes**

**Jennifer Uzoamaka DURUAMAKU-DIM** is a Lecturer in the Department of Guidance and Counselling, University of Calabar.

Email [jenduruamaku@gmail.com](mailto:jenduruamaku@gmail.com) Phone: 08032661708

**Christian Obasi AKPA** is at the Department of Community Medicine, Alex Ekwueme Federal Teaching Hospital, Abakaliki, Ebonyi NIGERIA. Email: [akpachris2013@gmail.com](mailto:akpachris2013@gmail.com)

**Obaya Effiong BASSEY** is a Lecturer in the Department of Guidance and Counselling, University of Calabar. [obayabassey@gmail.com](mailto:obayabassey@gmail.com) Phone: 08033833163

**Egor Eyeng EGWU** is a Lecturer in the Department of Guidance and Counselling, University of Calabar. Email:

[Eyengegor92@gmail.com](mailto:Eyengegor92@gmail.com) Phone: 08073850084

**Charles Uzoma IHEANACHO** is a Lecturer in the Department of Public Administration, Imo State Polytechnic, Omuma, Orlu NIGERIA