EFFECTS OF SCHOOL-BASED PROGRAMME ON BENYLIN WITH CODEINE ABUSE PREVENTION AMONG SECONDARY SCHOOL STUDENTS IN KATSINA STATE, NIGERIA

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2014

EFFECTS OF SCHOOL-BASED PROGRAMME ON BENYLIN WITH CODEINE ABUSE PREVENTION AMONG SECONDARY SCHOOL STUDENTS IN KATSINA STATE, NIGERIA

by

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Thesis submitted in fulfilment of the requirements for the degree of Doctor of Philosophy

OCTOBER 2014

DEDICATION

Dedicated to my adorable family:
Fadimatu Zahara'u, Nasir, Abdullah, Asma'u, Khadiza and Muhammad (Daddy)
Hamisu Mamman
Trainisu ivraminan
October 2014

ACKNOWLEDGEMENTS

In the name of Allah, the most Gracious, the most Merciful.

I would like to express my appreciation and gratitude to those who were

involved in my study at Universiti Sains Malaysia and the completion of this

scientific research (dissertation). First I would like to thank my main supervisor,

Associate Professor Dr. Ahmad Tajuddin Othman, for his support, guidance and

confidence that he renders to me in the accomplishment of this research. I would also

like to thank my co-supervisor Dr. Lim Hooi Lian for her valuable advices and

support in the completion of this dissertation. My sincere thanks go to TENDFUND

for supporting me financially to accomplish this task. I would also like to

acknowledge the Ministry of Education Katsina State for facilitating the procedures

and providing all the necessary supports for this study. My regard and appreciation

goes to school principals and students that participated in this research work. Special

thanks to the entire staff of the School of Educational Studies, Universiti Sains

Malaysia. I would also like to acknowledge Dr. Shehu Garba Matazu, Yahaya Mani

Tsauri, Awwalu Muhammd Inuwa, Dr. Badamasi Lawal, Ibrahim Tanko, Alhaji,

Abdulelah Salawi Rabi'u Muhammad, Shamsudeen and Tijjani Abubakar, for their

supports and kindness during my stay at Universiti Sains Malaysia

Hamisu Mamman

October 2014

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LIST OF ABBREVIATIONS

ATS Amphetamine-Type of Stimulant

CBT Cognitive Behavioural Therapy

CIDI Composite International Diagnostic Intervention

EU-DAP European Drug Abuse Prevention

FGN Federal Government of Nigeria

HBM Health Belief Model

HBV Hepatitis B Virus

HBSC Health Behaviour in School Aged Children

HCV Hepatitis C Virus

HIV Human Immune Virus

MI Motivational Intervention

MM Mix Mode

MOE Ministry of Education Katsina

MT Methodological Triangulation

ML Marijuana Ladder

NDCB National Drug Control Budget

NBS National Brue of Statistics, Nigeria

NDLEA National Drug Law Enforcement Agency

NIDA National Institute on Drug Abuse

ONDCP Office of the National Drug Control Policy

PBC Perceived Behavioural Control

PET Psycho – Educational Therapy

PC Primary Care

PYD Positive Youth Development

SBP School-Based Program

SN Subjective Norm

SCT Social Cognitive Theory

SLT Social Learning Theory

SE Self - Efficacy

SS Sensation Seeking

SSS Senior Secondary Schools

SES Socio-economic Status

SFA Skills for Adolescence

TPB Theory of Planned Behaviour

TRA Theory of Reasoned Action

TMC Trans theoretical Model of Change

THB Theory of Health Behaviour

Tr EAT Trial for Early Alcohol Treatment

UNODC United Nations Office on Drugs and Crime

WHO World Health Organization

KESAN PROGRAM BERASASKAN SEKOLAH BERKAITAN PENCEGAHAN PENYALAHGUNAAN BENYLIN DENGAN CODEINE DALAM KALANGAN PELAJAR SEKOLAH MENENGAH DI NEGERI KATSINA, NIGERIA

ABSTRAK

Kajian ini menyiasat kesan program berasaskan sekolah berkaitan pencegahan penyalahgunaan Benylin dengan Codeine dalam kalangan pelajar sekolah menengah di negeri Katsina, Nigeria. Teori tingkah laku terancang (TPB) telah digunakan sebagai kerangka teori. Sampel kajian terdiri daripada 900 responden yang mengambil Benylin dengan Codeine dalam tiga kawasan Zon Geografi (Zon Senator) di negeri Katsina, Nigeria. Prosedur persampelan rawak berstrata digunakan dalam memilih sampel. Responden telah dikumpulkan ke dalam lima kumpulan yang berbeza, Kumpulan 1 adalah responden yang menghadiri program ini setiap minggu, Kumpulan 2 adalah responden yang menghadiri program ini sekali dalam dua minggu, Kumpulan 3 adalah responden yang menghadiri program ini sekali dalam sebulan, Kumpulan 4 adalah responden yang menghadiri program ini sekali dalam penggal sekolah, dan Kumpulan 5 adalah responden yang tidak pernah menghadiri program ini. Bagi tujuan kajian ini, Kumpulan 1 (166) dan Kumpulan 5 (198) adalah kumpulan sasar. Kedua-dua data kuantitatif dan kualitatif telah dikumpulkan untuk kajian. Data kuantitatif dikumpul dengan menggunakan skala Teori Tingkah Laku Terancang. Manakala, data kualitatif telah dikumpulkan menggunakan protokol temu bual. Maklumat demografi responden dianalisis secara statistik deskriptif. Data kuantitatif dianalisis dengan menggunakan ujian-t dan regresi logistik digunakan untuk mengetahui variabel yang dapat meramalkan kehadiran program kempen kesedaran. Dapatan kajian menunjukkan terdapat perbezaan yang signifikan statistik pada p < .05 antara dua kumpulan yang dibandingkan, dengan mengambil kira kesan program pencegahan penyalahgunaan Benylin dengan Codeine. Program ini berkesan kepada responden yang menghadiri program ini setiap minggu, manakala program ini tidak berkesan kepada responden yang tidak pernah menghadiri program ini. Keputusan analisis regresi logistik menunjukkan bahawa kesedaran mengenai program kempen kesedaran dan keahlian Kelab Bebas Dadah adalah peramal kehadiran program pencegahan. Walau bagaimanapun, keputusan analisis data kualitatif menunjukkan bahawa beberapa faktor memudahkan murid-murid menyalahgunakan Benylin dengan Codeine termasuk, adanya dadah, pengaruh rakan sebaya, dan ketersediaan wang. Manakala bagi faktor-faktor yang menghalang penggunaan Benylin dengan Codeine adalah ketiadaan Codeine, dan kekurangan wang untuk membeli dadah. Perbincangan dibuat berdasarkan dapatan kajian, dan disarankan untuk mereka bentuk cadangan telah program pencegahan penyalahgunaan dadah yang memberi tumpuan kepada persepsi kawalan tingkah laku.

EFFECTS OF SCHOOL-BASED PROGRAMME ON BENYLIN WITH CODEINE ABUSE PREVENTION AMONG SECONDARY SCHOOL STUDENTS IN KATSINA STATE, NIGERIA

ABSTRACT

This study investigated the effects of a school-based program on Benylin with Codeine abuse prevention among secondary school students in Katsina State, Nigeria. The theory of planned behaviour (TPB) was used as the theoretical frame work. The sample of the study consisted of 900 respondents that take Benylin with Codeine within the three Geographical Zones (Senatorial Zones) in Katsina State, Nigeria. Stratified random sampling procedure was used in selecting the sample. The respondents were grouped into five different groups, Group 1 were the respondents that attended the program every week, Group 2 were the respondents that attended the program once in two weeks, Group 3 were the respondents that attended the program once in a month, Group 4 were the respondents that attended the program once in a school term, and Group 5 are the respondents that never attended the program. For the purpose of this study Group 1 (166) and Group 5 (198) were the target population. Both quantitative and qualitative data were collected for the study. The quantitative data were collected using Theory of Planned Behaviour (TPB) scales. While, the qualitative data were collected using interview protocol. Demographic information of the respondents was analysed using descriptive statistics. The quantitative data were analysed using t-test and logistic regression was used to find out which variables predict attendance of the enlightenment campaign program. The results revealed that there were statistical significant differences at p < 1.05 between the two groups compared, with regard to the effect of Benylin with

Codeine abuse preventive program. The program was effective to the respondents that attended the program every week, while the program was not effective to the respondents that never attended the program. Logistic regression analysis results indicated that awareness of the enlightenment campaign program and membership of Drug Free Club are predictors of attending the preventive program. However, the results of qualitative data analysis indicated that the some of the factors that facilitated the participants to abuse Benylin with Codeine include availability of the drug, peer group influence, and availability of money. While for factors that impeded the usage of Benylin with Codeine are unavailability of Codeine and lack of money to buy the drug. Results were discussed based on the findings of the study, and recommendations' were offered for designing substance abuse preventive programs that focus on perceived behavioural control.

CHAPTER ONE

INTRODUCTION

1.1 Introduction

Drug abuse is rapidly growing worldwide problem. The problem of drug abuse poses a significant threat to the health, economic, and social structure of families, communities and the nations. Almost every country in the world is affected from drug abuse among its citizens (Abudu, 2008; Lakhanpal & Agnihotri, 2007; Oshodi, Aina & Onajole, 2010). The problem of drug abuse has now crossed national, religious ethnic, and gender lines. The high level of drug abuse has brought problems such as increase in HIV/AIDS diseases, crimes, violence and collapse in the social structure. Chapter One introduces the background of the study, problem statement; research objectives, research questions, hypotheses, included are significance of the study, limitations of the study, definition of terms and summary.

1.2 Background of the Study

The use of tobacco, alcohol and other substances constitutes one of the most important risk-taking behaviour among youth's and adolescents in secondary schools. Despite worldwide concern and education about drugs abuse, many youth's and adolescents have limited awareness of their adverse effects; curiosity and desire to find out the effectiveness of a particular drug, social pressure and peer group influences are reported to be the primary reasons for drugs misuse (Dankane, 2012; Oshodi et al., 2010). Most of the adolescents and youth's start using drugs by experimenting with alcohol, tobacco and later they move on to take hard drugs such

as, cocaine and marijuana (Abudu, 2008; Igwe, Ojinnaka, Ejiofor, Emechebe & Ibe 2009; Oshodi et al., 2010).

The challenge of drug misused is growing within youth's and adolescents in schools and in the society around the globe (Dankane, 2012; Lakhanpal & Agnihotri, 2007). Obot (2001), Onajole and Bambala (2004) indicated that the most frequent used drug was heroin, benzodiazepines, cannabis and cocaine. The use of drugs in different categories has been motivated by several factors which include curiosity and desire to find out the effectiveness of a particular drug, hedonism, for pleasure of intoxication, search for excitement, and attraction for sports stimulation. Drug use within the youth's and adolescent's is hardly define as negative or harmful to youth's and adolescent's, due to their conclusion of placing all kinds of drugs under an act of recreational usage, like alcohol, and tobacco (Buhrich, Weller, & Kevans, 2000; Petrie, Bunn, & Byrne 2007). In line with the fact that the use and misuse of drugs among human and their activities (sports, reading, working, pleasure, stimulation) cut across borders of societies organisations schools, and other professional organisation of both youth's, adults and people of old age.

The United Nations on Drugs and Crime (UNODC) acknowledged the fact that the use and misuse of drugs is increasing and was estimated that between 2009 and 2010, a total of 149 to 272 million people, equivalent to 3.3 to 6.1 percent of the population aged between 15 to 64 abuse drugs. Inclusively, Cannabis is the most widely used with 125 to 203 million, which is equivalent to 2.8 to 4.5 percent and Amphetamines, is the second most widely used with 14 to 57 million, 0.3 to 1.3 percent, Opiods is the third most widely used with 12 to 21 million 0.5 to 0.8 percent

and with Cocaine the fourth with 14 to 21 million with 0.3 to 0.5 percent (UNODC, 2011). Drug abuse is a major social problem which is on the increase within and between youths and adults and mostly in the school, affecting students of 13 to 25 of age mostly. Drug abuse victims need a special treatment in the school, within their families, and societies. The importance of this, that is to treat and handle drug addicts victims, has remain a challenge to teachers, students, parents, health practitioners and the general public (Nutt, King, Saulsbury & Blakemore, 2007; White, Becker-Blease, & Grace-Bishop 2006).

Drugs, such as heroin, alcohol, marijuana, and cocaine that are psychoactive and they are responsible for high risk of incidences of murder, auto crash, marital problems, assaults, suicide and other deviant or unwanted behaviours in the society (Litchfield & White, 2006; Omadjohwoefe, 2010). Emanating from these abnormal acts, most of drug users are treated as criminals persecuted and sent to prison or even put to death depending on the type of deviant acts that the drugs push them to commit. Those that died from the action of the drug use and those sent to jail or executed as a result of their criminal actions have grave implications for their families, and society at large, for instance, children could be without parents, parents without children and men that constitute the labour force of the society are either wasted in prison or lost to death. Drugs abuse is also associated with various health risks, which cause collapsed veins, and damage to the lungs, liver, as well as brain. In greater usage of the drugs, possible effects include, malnutrition, psychosis, becoming violent, brain damage less resistance to infectious diseases, tetanus, and when using needles, an increased risk of contracting hepatitis and human immunodeficiency virus (Litchfield & White, 2006).

The usage of drugs among adult's members of the family can influence children and their involvement in other risk behaviour such as, illicit-drug use, cigarette smoking, binge drinking disorder, when children are raised in a family with history of alcoholism or drug abuse, the risk of the children developing drugs abuse problems increases. Children are more likely to become drugs users when their parent's abuse drugs. The risk factors for adolescents' abuse of drugs include, environmental factors, such as exposure to deviant peers and parents who use drugs, poor school bonding, low academic orientation, and poor family bonding. For the behavioural factors, there were poor academic achievement and tolerance of delinquency. And the last factor was interpersonal factors such as depression, perceived risk, and rebelliousness (Henry, Smith, & Caldwill 2007; Omadjohwoefe, 2010).

It was estimated that globally, there are between 104,000 and 263,000 deaths each year that are attributable to drug abuse, or equivalent, to 23.1 percent and 58.7 percent deaths per million individual's aged between 15 to 64 because of the drugs abuse (UNODC, 2011). In Europe, drugs abuse account for 4 percent of all deaths for the aged of 15 to 39 and the rates in some countries exceed 10 percent for the same age group. (Shannon, Havens, & Lon Hays, 2010) drugs abuse for example in women during pregnancy is a public health concern, because prenatal drugs abuse has been associated with complications for the mother, and there were negative outcomes of the foetus of the women, and it has been identified as the leading preventable causes of mental and physical health problems among children. Maternal tobacco use is associated with placenta previa, placental abruption, and increased stillbirth, premature birth, low birth weight, and sudden infant death syndrome, foetal

alcohol effects includes, learning difficulties, behavioural disorders, neurological abnormalities and prenatal morbidity. For example, Opiate use during pregnancy poses specific risk, with the most common complication of neonatal abstinence syndrome, which includes irritability, vomiting, fever, seizures, Sneezing, as well as diarrhoea.

Early involvement with tobacco and alcohol, use increased the risk of drug dependence, and abuse later in life. Adolescent drugs abuse is also considered part of the problem behaviour, for example, school failure can occur and support an anti social behaviours and later to delinquency. The effects of drugs abuse to the family include, inconsistent discipline, on the part of the drugs users, and peers, increase in violence and crime and collapse in the social structure. (Lakhanpal & Agnitotri, 2007; Low, Short, & Snyder, 2012). The abuse of drugs by adults is a costly social problem in the United States of America. The National Institute on Drug Abuse (NIDA) claimed that drugs abuse is related to many health effects such as, infectious disease like respiratory problems, cardiovascular effects, mental health effects, cancer, HIV, heart problems, kidney and liver damage, abnormal brain functioning, prenatal damage, heart rhythm irregularities, heart attacks, breathing difficulties, respiratory arrest, nausea, vomiting, and abdominal pain, poor muscular skeletal development, cramping and muscles weakness, seizures, memory loss, and cancer. Psychological effects may include depression, hallucinations, paranoia, aggression, and death (National Institute on Drug Abuse, 2012; Shannon, Havens, & Lon Hays, 2010).

Office of the National Drug Control Policy (ONDCP, 2011) stated that in countries where drugs abuse is established, the cost of the treatment is higher compared to other diseases. The agency also stated that drug abuse affects every sector of their society, ruining their economy, health care, and criminal justice system, and endangering the future of the young people (ONDCP, 2011). The United States cannot afford to continue paying the overwhelming tool of illicit drug abuse and its consequences, in 2007, the economic impact of drug abuse on American society totalled more than USD 193 billion. Building on the Obama Administration's inaugural strategy, released in 2011, NDCS serves as the nations blue print for reducing drugs abuse and its consequences, continuing their collaborative, balanced and science based approach. The 2011 NDCP emphasizes drugs abuse prevention and early intervention programmes in health care settings, diverting non-violent drug offenders in to treatment instead of jail, funding more scientific research on drugs abuse treatment, and supporting those in recovery (ONDCP, 2011). These represent an increase of USD 322.6 million (1.2 %) over the Financial Year 2010, enacted level of USD 25.9 billion. The requested funding will continue to strengthen nationwide efforts to discover, prevent, and treat drugs abuse in their communities and break the cycle of drugs abuse, crime, and imprisonment, while supporting those who are in recovery from addiction. (NDCB, 2012).

Drug misuse has remained a challenging social, psychological issue, which in some instance has resulted to moral, psychological, emotional instability to the individual involve. But, the drug abuse cases cut across nations and individual of various ages (Abudu, 2008; Obot, 2001). Therefore, it is not out of place to say that

school and students are equally part of this drug abuse cases which this study is interested in.

Data on drugs abuse in Africa is extremely limited, because there is lack of scientific surveys in the region. The limited information on drugs related treatment in Africa identified cannabis as the main problem, accounting for 64 percent of all treatment demand in the region; this is a far higher proportion of cannabis than any other region, followed by Opiods (19%), Cocaine (5%), Amphetamines type's stimulants (ATS) (5%), Methaqualone (4%), Khat (3%), inhalants and solvents (3%), sedatives and tranquillizers (2%) (UNODC, 2011; NDLEA, 2009). The drugs abuse related death in Africa is also limited. The best available estimates suggested that there are 13,000 and 41,700 drugs abuse related deaths, Equivalent to between 23 and 74 per one million people aged 15to 64. These figures showed that drugs related deaths in Africa are close to the global average.

1.3 Background of the Problem

Nigeria is the virtually densely populated country in Africa with over 170 million people, and majority of the population are youth's schooling in different areas of academic endeavours (Nigeria Population, 2013; National Bureau of Statistics, 2009). From the record of drugs abuse in Nigeria, the Northwest has a statistics of 755, which is equivalent to 37.47 percent of the drug victims in the country, in which Katsina State is included, while the South-west has been rated second with 347, equivalents to 17.32 percent, the South-east is been rated third with 263, equivalents to 13.5 percent, North-central has 236, equivalents to 11.71 percent, while the North-east zone has 172 equivalents to 8.54 percent of the drug users in the

country (Akannam, 2008). Akannam (2008) stated that the different types of drugs abuse are Cannabis Sativa, solution, lizard-dung, Delta, Madras, Kwana Tara, Magdon, and Valium. Others are Benylin with Codeine (Cough Syrup), Solvent, Arungumi Zaki, and Tsumi. It was estimated that over 3 million bottles of Benylin with Codeine (cough syrup) are being consumed in both Jigawa and Kano states daily due to scarcity of cocaine (Akannam, 2008). And over 6 million bottles of Codeine are sold on a daily basis in the North-western part of the country where Katsina State was included (Williams, 2012).

Table 1.1

Prevalence Rate of Drugs Abuse in Nigeria Based on Geographical Zones

Percentage	Geographical Zones
37.47	North –West
17.32	South – West
13.50	East
11.71	North – Central
8.54	North- East
	North- East

Source: (Akannam, 2008).

UNODC (2007), in Nigeria, the estimated life time consumption of cannabis among the population is 10.8 percent, followed by psychotropic substances like benzodiapines and amphetamine-type stimulants 10.6 percent, heroin 1.6 percent, and cocaine 1.4 percent, in both urban and rural areas. Drugs abuse appears to be common among males with 94.2 percent than females 5.8 percent, and the age of first use is 10 to 29 years. The use of volatile organic solvents is 0.53 percent, and is

widely spread among the street children, in school youth's and women. Multiple drug use happens nationwide with 7.88 percent to varying degree.

In Nigeria, earlier studies on students drugs abuse were largely hospital based and limited to selected regions of the country, and for the past 10 to 5 years, such studies have taken the form of field work employing epidemiological techniques so as to provide more comprehensive information related to types, pattern of abuse and psycho-social correlates in drugs abuse among secondary school students (Abudu, 2008; Oshodi et al., 2010). From such studies it has been found out that alcohol, hyponosedatives, tobacco, and psycho stimulants were the commonly abuse drugs, with different prevalence rates of drug abuse. For example in Osun state, the life time prevalence rate of drugs abuse among secondary school students was found to vary between 3.0 percent for tobacco, and 48.7 percent for Salicylate Analgesics, while psycho stimulants, 20.9 percent, Anti-biotic 16.6 percent, and Alcohol, 13.4 percent, hypnosedatives, 8.9 percent (Fatoye & Morakinyo, 2002). In Sokoto State, the reported prevalence rates were 10.9 percent for tobacco, and 17.8 percent for psycho stimulants, among secondary school students (Nnaji in Oshodi et al., 2010). And 19.5 percent for tobacco, while 50.7 percent for psycho stimulants, in River state (Makanjuola et al., in Oshodi et al., 2010).

Table 1.2

Prevalence Rate of Drugs Abuse among Secondary School Students Based on some

States in Nigeria

States	Types of Drugs Abused		Percentage
OSUN	a.	Tobacco	3.0
	b.	Salicylate Analgesics	48.7
	c.	Psycho stimulants	20.9
	d.	-	16.6
	e.	Alcohol	13.4
	f.	Hypnos datives	8.9
SOKOTO	a.	Tobacco	10.9
	b.	Psycho stimulants	17.8
RIVERS	a.	Tobacco	19.5
	b.	Psycho stimulants	50.7
LAGOS	a.	Caffeine	85.7
	b.	Mild Analgesics	73.8
	c.	Anti-Malaria	65.7
	d.	Heroin	3.8
	e.	Cocaine	85.7
	f.	Tobacco	9.2
	g.	Cannabis	4.4
	h.	Glues/Organic solvents	4.8
	i.	Alcohol	9.2
ENUGU	a.	Alcohol	14.3
	b.	Inhalants	9.0
		Tranquilizers	7.4
	d.	Cannabis Sativa	4.1
KATSINA	a.	Cannabis Sativa	15.3
	b.	Tobacco	18.7
	c.	Benylin with Codeine	21.6

(Fatoye, & Morankinyo 2002; Nnaji in Oshodi et al., 2010; Anochie, Nkangineme, & Alikor in Oshodi et al., 2010; Oshodi et al., 2010; Igwe, at al., 2009; Ministry of Education Katsina State, 2012).

In Lagos State, the commonest drugs abuse among secondary school students were caffeine (85.7%), mild analgesics (73.8%) and the anti-malaria drugs (65.7%), and for heroin (3.8%), and cocaine (85.7%). For the so called gateway drugs such as alcohol and tobacco, their life time use prevalence rates was 9.2 percent, cannabis was 4.4 percent, alcohol 9.2 percent, glues/ organic solvents 4.8 percent (Oshodi et al., 2010). In Enugu State, the prevalence rates of drugs abuse among secondary

school students is, 33.7 percent of the students were drugs abusers, alcohol (14.3%) was most commonly abused, inhalants (9.0%), tranquilizers (7.4%), and cannabis (4.1%) (Igwe et al., 2009). In Katsina State, the prevalence rates of substance abuse among senior secondary school students are, Benylin with Codeine (Cough Syrup) was the most commonly abused, with 10,897 (21.6%), followed by tobacco 9,433 (18.7%), cannabis sativa 7,730 (15.3%), and some students were multiple substance users (Ministry of Education Katsina, 2012).

With above percentages of drugs abuse among the youths have push the stakeholders in Nigeria to make a call on Nigerian Government to embark on continued enlightenment campaign to its youths and general populace on the effects of drugs abuse. In 2011, Nigeria joint the rest of the world to celebrate the International Day Against Drug Abuse and Trafficking marked June 26, of every year, the number of international governments, and organizations in collaboration with the National Drug Law Enforcement Agency (NDLEA), government and some local organizations to save Nigeria from becoming a drugs abuse nation (Giade, 2011). According to Giade (2011), any nation being used by drug tycoons as a transit route has the potentials of becoming a drugs abuse consumer's country. Drugs abuse threatens the security of every nation, there for we must put our hands together to enlighten our youths on the dangers of drugs abuse.

On its efforts to reduce the drugs abuse among the youth's in Nigeria, the National Drug law enforcement agency hold a series of national awareness/sensitization campaign programmes against the use of drugs. For example, in Jigawa state, the commandant urged youths in the state to shun drugs abuse,

saying that, drugs abuse "threat to human life as well as destroying the economy of the country" (Akannam, 2008). However, most of the states in Nigeria have not fully enforced the legislative control measures to reduce the prevalence of drugs abuse in Nigeria. Since it was announced in June 2006 by the Honourable Minister of Health, only few states have inaugurate a malty-sectoral and ministerial committee on drugs abuse control measures in Nigeria, from state to local government levels. The only state that adapts the control measures is Abuja, the capital territory of Nigeria (Ekanem, 2008). The non-medical consumption of Benylin with Codeine in Northern Nigeria has become a subject of public concern of recent because of its potential danger to the society (Dankane, 2012). Moreover, there is no research evidence attempts to acknowledge public study on the effects of school-based substance abuse prevention (Benylin with Codeine, Cough Syrup) among secondary school students in Katsina State, Nigeria. For this reason, this current study was aimed to find out the effects of school-based programme on substance abuse prevention among senior secondary school students in Katsina State, Nigeria, using the Theory of Planned Behaviour (TPB).

Katsina State is the fourth largest populous state in Nigeria, with over 5, million people, and 50 percent are youths from different parts of the state, and most of these youths are schooling in different institutions of leaning (Ekanem, 2008; National Bureau of Statistic, 2009). Therefore, there is a need for Katsina State government to have a healthy, quantitative, and efficient work force that could be transform in to services for socio-economic, political, technological, and educational development, not a sick youths which are less productive ones.

Adolescent's substance abuse is related to many negative outcomes in both the short and long term effects. Example, adolescent drugs abusers are more likely than non-users to drop out from schools, engage in human immunodeficiency virus risk behaviours and showed other forms of delinquencies. They were also more likely to be arrested (Henry et al., 2007).

The usage of substances among students in secondary schools remains a major concern on most of schools. Problems commonly associated with such abuse, include poor academic performance, property damage, physical injuries, damaged relationship among students and staff, unprotected sexual activity, and suicide, (Abudu, 2008; Maxwell, 2002; Perkins, 2000). Adolescents encounter numerous risks in their daily lives; peer groups are often blamed for the onset of risk behaviours ranging from substance abuse, (Oshodi et al., 2010; Henry et al., 2007). Benylin with Codeine is a cough/cold remedies, and is the most popular anti-tussive medication. Adolescents in the United States and Europe elate themselves with acute megadoses of Benylin with Codeine. Adolescents takes the drug at parties and even before or after school since the drug is legal, relatively expensive, and easily available at drug or pharmaceutical stores. Some side effects of Benylin with Codeine include nausea, depression, drowsiness, itching, euphoria, constipation, vomiting, dry mouth, orthostatic hypotension, and urinary retention (Schwart, 2005).

Schwart (2005) and Nwanedo (2012) reported that Benylin with Codeine have a high potential for abuse simply due to the ease of acquisition and low cost. Benylin with Codeine is most common in liquid forms, tablet, and gel capsules. When taken at high doses, Benylin with Codeine can result to feelings of relaxation

and drowsiness; many people report the side effects similar to the effects of marijuana. If Benylin with Codeine is taken more than the prescribed amount, it delivers the same of a hallucinogenic drug such as LSD. The side effects of this drug include allergic reactions such as hives, difficulty in breathing, swelling of the face, lips, tongue, or throat. For more serious effects include the following severe anxiety, dizziness, restless feeling, slow breathing, and confusion.

The abuse of Benylin with Codeine can cause psychological and physical dependence. Because of this, it is a substance of abuse and a lot of people have abused it because of several reasons. Nwanedo (2012) reported that in Nigeria, especially in the north, a lot of people use Benylin with Codeine for pleasure and to get high, and being high, in their manner of speaking, meaning that the drug acts on their central nervous system, which can change their moods. Most people believed that abuse of Benylin with Codeine can energise them for sexual performance. Nwanedo (2012) stressed that both male and female use the substance for the same purpose, because they believe it will improved their sexual desire. On its efforts to stop substances abuse to its citizens the Federal Government of Nigeria has ban the sale of Benylin with Codeine in the counter, this was announce by the Minister of Health on 16 January 2013. The Minister said that cough syrups with Codeine would henceforth be treated as a narcotic medicine and will no longer be sold over the counter. The minister expressed concern over the rising abuse of Codeine, and said that the ministry is taking drastic steps to regulate the availability of the drug (Chukwu, 2013).

1.4 Problem Statement

Substance abuse continues to be major risk behaviour among adolescents with consequences of physical and or mental health. The rapid increase in the involvement of youth's and adolescents in substance abuse has in recent years become a source of concern to parents, society, government, and other stake holders in Nigeria, (Oshikoya & Alli, 2006; Abudu, 2008). Substance abuse among the secondary school students in Katsina State, Nigeria has increase for example; Benylin with Codeine has grown from 5.3 percent in 2008, to 21.6 percent in 2011. Tobacco Smoking grown from 6.1 percent in 2007 to 18.7 percent in 2011. Cannabis Sativa has grown from 10.9 percent in 2008 to 15.3 percent in 2011, (MOE, 2012). And a programme named Enlightenment Campaign Programme was introduce under the Drug Free Club in schools by the authority concerned backed by law to curtailed this increase of substance abuse, but such programme have yielded little or no positive result. Though a lot of literature exists on substance abuse; not much is done in respect of Benylin with Codeine as a substance of abuse in Nigeria especially within the context of north-western Nigeria. This showed that there is a literature gap in the area of study with respect to Benylin with Codeine abuse. Therefore, the study aims to examine the effects of the enlightenment campaign/sensitization programme organized by the Drug Free Club through the students' behavioural intention, attitudes, subjective norms, and perceived behavioural control (PBC) among senior secondary school students in Katsina State, Nigeria with regard to Benylin with Codeine abuse prevention using the TPB

1.5 Objectives of the Study

The purpose of this study is to examine the effects of school-based programme on Benylin with Codeine abuse prevention among senior secondary school students in Katsina State, Nigeria using the TPB. Four objectives were formulated for the study which includes.

- 1. To find out the students involvement with Drug Free Club in their schools.
- 2. To group the students based on their attendance to the Enlightenment Campaign Programme organized by the Drug Free Club.
- 3. To examine the effects of the Enlightenment Campaign Programme based on the theory of planned behaviour constructs between groups of students attending the programme and students that didn't attend the programme.
- 4. To find out which variables predict the respondents to attend the Enlightenment Campaign Programme.
- 5. To find out factors that facilitates or impedes the abuse of Benylin with Codeine between the participants (qualitative study).

1.6 Research Questions

For the purpose of this study four research questions were developed as follows:

- 1. How is the respondent's involvement with the Drug Free Club?
 - a. Are you aware of the existence of the Drug Free Club in your school?
 - b. What is the strength of respondent's membership with the Drug Free Club?
 - c. What is the strength of respondent's awareness for the weekly Enlightenment Campaign Programme?

- 2. How often respondent's do attends the substance abuse preventive programme organised by the Drug Free Club?
- 3. Are there any significant differences in TPB constructs between students whom attend the preventive programme every week and those who never attend the programme? With regards to their Behavioural Intention, Attitudes, Subjective Norms, and Perceived Behavioural Control.
- 4. Which variables predict the respondents to attend the Enlightenment Campaign Programme?
- 5. What are the factors that facilitate or impede the abuse of Benylin with Codeine between participants? (Qualitative study).

1.7 Research Hypothesis

For the purpose of this study one main research hypotheses was formulated with four sub-hypotheses to answer Research Question 3.

Main Hypothesis 1

It is hypothesized that there are differences in respondents' score in Behavioural Intention, Attitudes, Subjective Norms and Perceived Behavioural Control towards the abuse of Benylin with Codeine between those who attended the Enlightenment Campaign Programme and those who don't.

Sub-hypotheses

 H_01 There is no significant difference on the effects of the Enlightenment Campaign Programme on respondent's Behavioural Intention towards the abuse of Benylin with Codeine between the two groups compared.

- H_02 There is no significant difference on the effects of the Enlightenment Campaign Programme on respondent's Attitudes towards the abuse of Benylin with Codeine between the two groups compared.
- H_03 There is no significant difference on the effects of the Enlightenment Campaign Programme on respondent's Subjective Norms towards the abuse of Benylin with Codeine between the five groups compared.
- $\mathbf{H_{0}4}$ There is no significant difference on the effects of the Enlightenment Campaign Programme on respondent's Perceived Behavioural Control towards the abuse of Benylin with Codeine between the two groups compared.

However, no study was conducted in Katsina State, in relation to the effects of school-based substance abuse prevention programme with regard to Benylin with Codeine (Cough Syrup) among secondary school students using the TPB, and intervention for controlling the Benylin with Codeine in secondary schools, in Katsina State, Nigeria. Katsina State was faced with the problem of abuse of substances among secondary school students, but this present study concentrate on the effect of school-based programme on substance abuse prevention programme (Benylin with Codeine) because of its high increase among the senior secondary students in Katsina State.

1.8 Significance of the Study

• The findings of this study will serves as guidelines for the educational developers to include the knowledge of substance abuse prevention in schools curriculum, right from primary, secondary schools, up to higher institutions of learning.

- The results of this finding will also serve as a support to Katsina State, government to have close observations and monitoring of substance abuse among secondary school students in Katsina State, Nigeria.
- The results of this study will be an addition to the current scientific knowledge and information on substance abuse intervention strategies as a cornerstone of control measures, in Katsina State, Nigeria.
- The results of this study will contribute to the general public on the
 effects of substance abuse to their health and others. The study also
 provides suggestions on how to reduce the abuse of substance among
 senior secondary school students in Katsina State, Nigeria.

1.9 Operational Definitions

1.9.1 Behavioural Intention

Behavioural intention is described, as a person decision or effort toward performing the behaviour, attributable to his attitudes, subjective norms, and perceives behavioural control known as self-efficacy (Ajzen, 1991; Marcoux & Shope, 1997). And for the purpose of this study, senior secondary school students in Katsina State, were used to find out the effects of school-based substance abuse prevention programme through the respondents behavioural intention with regard to the usage of Benylin with Codeine, and it was measured on a 4 point Likert scale, following this statements, (I intend to take Benylin with Codeine, I expect that I will take Benylin with Codeine, strongly disagree to strongly agree). Higher scores indicate stronger Behavioural Intention to take Benylin with Codeine (Francis et al., 2004; Litchfield & White, 2006).

1.9.2 Attitude

Ajzen (1991); Majid, Hamid, Bbak, Abdullah, and Hossein (2011); Marcoux, and Shope, (1997), conceptualized attitude as an individual's positive or negative assessment of self-performance of the behaviour. The concept is the degree to which performance of the behaviour is positively or negatively value. It is determined by the total set of accessible of the Behavioural beliefs linking the Behaviour to various outcomes and other attributes. Therefore, Katsina State senior secondary school students attitudes towards the effects of school-based programme on substance abuse prevention (Benylin with Codeine) was measured in 4-point Likert scale, example, for you personally to abuse of Benylin with Codeine is beneficial, Strongly disagree, to Strongly Agree and the higher scores indicating high attitudes of the respondents to use Benylin with Codeine (Francis et al., 2004; Litchfield & White, 2006).

1.9.3 Subjective Norm

Subjective Norm is an individual's perception of social normative pressures, or relevant of others beliefs that he or she should or should not perform a behaviour, for example, parents, friends at school friends at home, school teachers etc, (Ajzen, 1991; Maxwell, 2002; Francis et al., 2004). And for the purpose of these study subjective norms refers to the approval or disapproval of respondents Benylin with Codeine abuse by important people, individual or groups, such as school teachers, parents, religious leaders, neighbours. The effects of school-based substance abuse preventive programme was measured on 4 point Likert scale for example my teachers thinks, that (I should/ I should not), abuse Benylin with Codeine. My best friend thinks that I should take Benylin with Codeine. (Strongly disagree/ strongly

agree), high score indicating social influence play important role on the respondents to use Benylin with Codeine (Francis et al., 2004; Litchfield & White, 2006).

1.9.4 Perceived Behavioural Control

Perceived Behavioural Control (Ajzen, 1991; Francis et al., 2004), is an indication of an individual's perceive ease or difficult of performing the particular behaviour (Francis et al., 2004; Litchfield et al., 2006). It is assumed that perceive behavioural control is determine by total set of accessible control beliefs (Marcoux, & Shope, 1997; Tavousi et al., 2009). Therefore, for this study, the perceive behavioural control is described as respondents beliefs about ease or difficulty to stop the usage of Benylin with Codeine, and it was measured on a 4 points Likert scale items, to Strongly Disagree to Strongly Agree to the following statements. Avoiding Benylin with Codeine abuse in future is entirely up to me, *I am confident that I will avoid use of Benylin with Codeine, if I wanted to.* Higher scores indicating stronger perceive behavioural control among the participants to stop the usage of the Codeine (Francis et al., 2004; Litchfield & White, 2006).

1.9.5 Behaviour

Ajzen (1991) Marcoux and Shope (1997) defined behaviour as an individual's observable response in a given situation with respect to a given intention. Behaviour is used to be describe as acts of conducted, arrange of actions and a mannerisms produce by organisms. Behaviour is central in to two factors, the organisms and environment. The act of behaviour which is inner built, by interior or act of reason, that is influenced by organisms and the behaviour that is influenced by outer factors, artificial of the biological, this is an action that is controlled by

environmental factors of the individual (Francis et al., 2004; Ajzen, 1991; Huang, Chien, Cheng, & Guo, 2012).

1.9.6 Secondary School Students

The present educational scheme in Nigeria is operating 9-3-4 system (Federal Government of Nigeria, 2004), and the senior secondary school (SSS) is second phase. This category (SSS) is for three years, the first 9 is for primary and junior secondary school (JSS), 3 years for senior secondary school students, and 4 years for university degree programme on a conventional bases (Anuforo, 2007; Federal Government of Nigeria, 2004).

1.9.7 Substance Abuse

World Health Organization (2014) Substance abuse refers to the "harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs". Abudu (2008) Defined substance abuse as the random over dependence or abuse of one particular drug with or without a prescription from qualified medical practitioners. Therefore, substance abuse is conceptualised as a "dangerous or unsafe use of psychoactive substances, including illegal drugs and alcohol."

1.10 Limitations of the Study

The following are the short comings for this study

 The study is for students of public secondary schools, the private secondary school students were not involved in Katsina State. This is not limited to any of the gender classifications in all public secondary schools in Katsina State of Nigeria.

- 2. There is no accurate record specifically on students' drug abuse rate in the ministry of education in Katsina State, Nigeria.
- There is no accurate and specific information with respect to drug abuse in the case of Benylin with Codeine abuse on secondary school students of Katsina State.
- 4. There is a contradiction between information provided by Katsina State Ministry of education and available information by individual schools on cases of student's drug abuse.
- 5. The state and school are dominantly Muslim children; therefore, the nature of freedom to interact freely with the female students during the study was a challenge.
- 6. Some of the students who are expected to respond to the questionnaire use the excuse of parental concern as a barrier, and others are not interested in returning the questionnaire.
- 7. Junior secondary schools students were not involved in the study.

1.11 Summary

Chapter one discussed the background of drug abuse, effects of drug abuse among the people which include vomiting, HIV/AIDS diseases, drop out from school, poor family bonding. Included also are prevalence rates of drug abuse. It also discussed the problem statement, purpose, objectives, and research questions of the study. One main hypothesis with 4 sub-hypotheses was included. This chapter also articulated the significance of the study and its operational definitions.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

Effective programmes that address health promotion are expected to be based on the solid understanding of the health behaviours to be modified and the environmental circumstance in which these health behaviours occur. Health behaviour models and theories provide a systematic way of trying to understand why people do the things they do and how their environment provides the context for their behaviour. Using health behaviour theories and models in the improvement of health related programmes and interventions helps to ascertain the evidence base upon which health programmes and interventions were built. Programmes and interventions that influence health behaviour include educational programmes and health promotion and interventions. These health programmes and interventions may be beneficial to individuals and community at large, when the programmes or interventions were guided by theories of health behaviour. Theories of health behaviour identify the aims for change and the methods for accomplishing these changes. Theories and models also inform the evaluation of change efforts by helping to identify the outcomes to be measured, as well as timing and methods of study to be used (Glanz, Rimer & Viswanath, 2008; Marcoux & Shope, 1997).

This chapter consists of literature review on theories and models of health behaviour. The chapter also described the main constructs of the Theory of Planned Behaviour (TPB) and substance abuse. Included are empirical studies of substance abuse behaviour. School-based programme on substance abuse prevention,