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RECENT TRENDS IN DRUG ABUSE AMONG YOUNG FEMALES IN BAYELSA STATE

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Abstract

Drug abuse is a pervasive issue with far-reaching impacts on society, affecting people of all ages globally, as evidenced by the staggering number of individuals suffering from drug abuse disorders. The aim of the study was to examine drug abuse as a recent trend among young females in Bayelsa. The theory adopted was the Social Learning Theory. The study sampled a total of 216 individuals. The study adopted the cross-sectional survey, using an online questionnaire. Data for the study were primarily collected through questionnaires and analyzed using descriptive statistics with the use of frequencies and percentages. The findings of the study show that drug abuse among young females in Bayelsa State is prevalent, with multivitamins, Paracetamol, and alcohol being commonly used. Others include ampiclox, codeine, tramadol and cannabis. Negative impacts include irrational behaviour, physical unwellness, and strained social relationships, while reasons for continuing drug abuse vary, with addiction and pleasure being reported by some respondents. Furthermore, the study recommends implementing targeted interventions to address drug abuse among young females in Bayelsa State. It emphasizes the importance of raising awareness about the negative consequences of drug abuse through mass media campaigns, educational programs, and community engagement. The study also suggests stricter enforcement of drug regulations, and providing employment opportunities for youths to combat drug abuse effectively.

Keywords: Drug abuse, Females, Bayelsa, Social Learning, Alcohol

Introduction

Drug abuse has been a topic of discussion since the invention of drugs and the adverse effect on society cannot be overemphasized. Drug abuse is described as the non-adaptive model of drug use with concomitant adverse health consequences that usually produce cognitive, behavioural, and psychological dysfunction problems among abusers (Nahvizadeh et al., 2014). It is a phenomenon that is growing at an alarming rate, which nearly every country in the world, including Nigeria, has to tackle (Nahvizadeh et al., 2014).

The United Nations Office on Drugs and Crime (UNODC) (2005) reports that 5% of the world's population, making up about 200 million people between the ages of 15 and 65 have used drugs at least once in the last 12 months. Approximately one out of every 20 adults in the world, were confirmed drug abusers in 2014 resulting in over 29 million people worldwide

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suffering from drug abuse disorders (Obiechina & Isiguzo, 2016). In Asia and Europe, 62% of all drug treatment sought in 2003 was opiates. While the total number of the global population admitting to consuming drugs consists of 3.3 to 4.1 percent, more worrisome is the rate at which younger people are getting addicted. For instance, in Czech Republic, new drug users who were teenagers aged 15 and 19 years were 37 percent. In Pakistan, those who started using heroine at 15-20 years of age doubled to almost 24%. Furthermore, reports from Egypt shows that almost 6% of students in secondary and tertiary schools have experimented with drugs, especially heroin (Odejide, 2014).

Nigeria is one of the focal point of drug abuse in Africa, and indeed, the world. Drug prevalence in Nigeria is alarming, with a 15% prevalence rate, which is about three times the global prevalence rate of 5.5% (NDLEA Today, 2021). This prevalence rate is however, more prominent among the youths. It is as high as 20%–40% among the youths (Jatau et al., 2021). This is because the transition from childhood to adolescence represents a delicate period during which initiating drug abuse may occur (Obiechina & Isiguzo, 2016).

In Nigeria, one in seven persons aged 15-64 years had used a drug (other than tobacco and alcohol) in the past year (McCance-Katz, 2018). The prevalence of any drug use is estimated at 14.4%, corresponding to 14.3 million people aged 15-64 years who had used a psychoactive substance in the past year for non-medical purposes (United Nations, 2017). It is popularly believed that drug abuse, dependency and addiction are a male phenomenon and females are not involved in it as much as their male counterparts (Mohammad, et al., 2015). However, over the last 2 to 3 decades, substance use among females has increased drastically. The highest level of any past-year drug use was among those aged 25-39 years and among every four drug users in Nigeria one is a woman (United Nations, 2017).

Several studies revealed that women are susceptible to pain and are likely to have chronic pain, which could contribute to the high rates of opioid prescriptions misuse among young females of reproductive age. In addition, females may be more likely to take prescription opioids without a prescription to cope with pain (Gjersing & Bretteville-Jensen, 2014). Prescription drug misuse can also be dangerous if mixed together without a physician's guidance, or mixed with other drugs or alcohol (Gjersing & Bretteville-Jensen, 2014).

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These studies highlighted above were mainly done outside the shores of Bayelsa State. Hence, this study seeks to bridge this gap by investigating the trend of drug abuse among young females in Bayelsa state. Secondly, the studies above focused on factors that aid drug abuse with respect to different age range, mostly adult and males, however, this study will focus on young females between the ages of 15 to 35 in Bayelsa State. In the light of the above, the main objective of this study was to examine drug abuse as a recent trend among young females in Bayelsa State and within the context of the broad objectives the specific objectives of this study were; (1) to ascertain the prevalence of drug abuse among young females in Bayelsa State; (2) to examine the types of drugs abused by females in Bayelsa State; (3) to investigate the negative impact of drug abuse among young females in Bayelsa State; and (4) to proffer possible solutions to drug abuse among young females in Bayelsa State.

Theoretical Framework

The role of theory in research cannot be overemphasized, theories serves as mirrors from which the reflections of society and social phenomenon can be analyzed and explain. This study employed the Social Learning Theory to examine drug abuse among young females in Bayelsa state.

Social Learning Theory: According to the social learning theory, people pick up social skills by watching and copying the actions of others. The social learning theory was created by psychologist Albert Bandura in 1977 as an alternative to the prior research of B.F. Skinner, a colleague who is well-known for his effect on behaviourism. Although behavioural psychology concentrates on the ways in which the environment and reinforcement impact behaviour, Bandura argued that people might pick up behavioural skills through observation, imitation and modelling. The theory takes into consideration how cognitive and environmental variables interact to influence how people learn (Hammer, 2011).

Four mediational processes identified by the social learning theory help in determining whether a new behaviour is learned (Fryling, et al., 2011):

- (a) Attention: How much we pay attention to the behaviour. Before we can copy behaviour, it needs to get our attention.
- (a) Retention: The degree to which we can recall the action. If we can't recall the behaviour, we can't execute it.

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(c) Reproduction: The capacity to carry out the action. This is the capacity to mimic an observed behaviour.

(d) Motivation: The desire to adopt the actions. Vicarious reinforcement is the term used to describe this mediation process.

The observer will examine the subsequent behaviour as well as the rewards and penalties. An observer is likely to copy behaviour if they believe the benefits outweigh the penalty. However, the observer won't mimic the behaviour if they don't think the vicarious reinforcement is valuable enough. Several fundamental presumptions form the basis of social learning theory:

(i) People pick up knowledge from observation. By simply seeing a model, learners can pick up new behaviours and knowledge.

(ii) Punishment and reinforcement have unintended consequences on behaviour and learning. Based on how present behaviours are rewarded or penalised, people develop expectations about the possible outcomes of future actions.

(iii) Mediating processes affect our actions; cognitive elements that affect the acquisition of a behaviour.

(iv) Change does not always follow from learning. A person's behaviour does not necessarily change just because they acquire new knowledge (Fryling, et al., 2011).

This theory is relevant to the study since there are many examples of social learning in the real world of people copying others—be it acting out a scene from a movie, smoking like someone else, or abusing drugs with friends, among other things. Usually, the need to fit in or be liked by others drives this frantic behaviour. To blend in or get attention, young people may try to imitate mentors, famous people, and their peers. In addition to being emulated, negative behaviours are also modelled.

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Research Methodology

A cross-sectional survey research design was adopted for the study and the study area was Bayelsa State in Nigeria. All young females between the ages of 15-35 residing in Bayelsa state either as indigenes or as non-indigenes and the convenience and snowball sampling techniques were used to select respondents used for the study. This cross-sectional survey utilized an anonymous online questionnaire that was used to collect data from respondents. The online survey ran for a period of six weeks following the release of the link bearing the research questionnaire. The initial sample size was 384, determined using Cochran's (1977) sample size determination formula, however, at the end of the six weeks window, only 216 persons filled out the questionnaire which was analyzed for this study. Descriptive statistics was used in analyzing data collected with the aid of Statistical Package for Social sciences (SPSS). The study made use of an online questionnaire, this made anonymity and privacy easy to achieve. Also, the questionnaire was designed in such a way that an individual would accept to fill the questionnaire before they can proceed. Participation of all respondents was voluntary and no respondent was induced in any form to respond to the questions provided on the questionnaire.

RESULTS

Social-Demographic Characteristics

The provided table presents the distribution of respondents based on their socio-demographic profile. The table includes variables such as residence, age group, religion, level of education, employment status, monthly income, marital status, and ethnic group. Each variable is accompanied by the frequency and percentage of respondents falling into each category. In terms of residence, the respondents are primarily distributed across multiple areas. Opolo has the highest frequency with 61 respondents, accounting for 28.8% of the total sample. Tombia follows closely with 50 respondents (23.1%), while Edepie, Agudama, Kpansia, Ovom, Swali, Yenizue-gene, and Amarata have relatively lower frequencies, each with 5 respondents (2.3%).

In terms of age groups, the highest frequency is found in the 20-24 age range, with 120 respondents accounting for 55.6% of the sample. The 25-30 age groups represent the next

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highest frequency with 56 respondents (25.9%), followed by the 15-19 age group with 20 respondents (9.3%). The 30-35 age group has the lowest frequency with 20 respondents (9.3%).

In terms of religion, the majority of respondents identify as Christians, accounting for 78% of the sample. Islam represents a smaller percentage with only 7 respondents (3.2%), while the remaining 18.1% of respondents fall under the category of other religions. In terms of education, the distribution of respondents reflects a higher level of education. The majority of respondents, 69.9%, have attained tertiary education. Secondary education represents the next highest frequency with 45 respondents (20.8%), followed by primary education with 7 respondents (3.2%). Interestingly, 6% of the sample reported having no formal education.

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Table 1: Distribution of Respondents Based on Their Socio-Demographic Profile

Variables	Frequency (216)	Percentage (100%)
Residence		
Opolo	61	28.8%
Tombia	50	23.1%
Edepie	20	9.3%
Agudama	60	27.8%
Kpansia	5	2.3%
Ovom	5	2.3%
Swali	5	2.3%
Yenizuegene	5	2.3%
Amarata	5	2.3%
Age group		
15-19	20	9.3%
20-24	120	55.6%
25-30	56	25.9%
30-35	20	9.3%
Religion		
Christianity	170	78%
Islam	7	3.2%
Others	39	18.1%
Level of education		
No formal education	13	6%
Primary	7	3.2%
Secondary	45	20.8%
Tertiary	151	69.9%
Employment status		
Unemployed	77	35.6%
Business owner	50	23.1%
Civil servant	22	10.2%
Sales person	25	11.6%
Others	42	19.4%
Monthly income		
Less than ₦ 15,000	42	19.4%
₦ 15,000 – ₦ 25,000	64	29.6%
₦ 25,000 – ₦ 35,000	49	22.7%
₦ 36,000 – ₦ 45,000	23	10.6%
₦ 46,000 - ₦ 55,000	13	6%
₦56,000 & above	25	11.6%
Marital Status		
Single	162	76.8%
Married	46	21.8%
Widowed	3	1.4%
Divorced/separated	5	2.3%
Ethnic group		
Ijaw	104	48.2%
Epie	30	9.5%
Nembe	19	8.8%
Ogbia	10	4.6%
Igbo	14	6.5%
Urhobo	7	3.2%
Yoruba	5	2.3%
Ekwere	5	2.3%
Kalabari	3	1.4%
Efik	2	0.9%
Tiv	12	5.6%
Hausa	5	2.3%

Source: Field Survey 2023

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With regards to employment status, the largest category consists of unemployed respondents, representing 35.6% of the sample. Business owners and civil servants each constitute a smaller proportion with 10.2% and 23.1% respectively. Salespersons and others account for 11.6% and 19.4% respectively. Concerning monthly income, the respondents' earnings vary across different ranges. The highest frequency lies within the N 15,000 - N 25,000 range, representing 29.6% of the sample. The other income ranges, N 25,000 - N 35,000, N 36,000 - N 45,000, N 46,000 - N 55,000, and N 56,000 & above, have frequencies of 22.7%, 10.6%, 6%, and 11.6%, respectively. The lowest frequency, 19.4%, corresponds to respondents earning less than N 15,000.

In terms of marital status, the majority of respondents are single, accounting for 76.8% of the sample. The married category represents 21.8% of respondents, while widowed and divorced/separated respondents make up smaller proportions of 1.4% and 2.3%, respectively. Lastly, the ethnic group distribution shows a dominant representation of the Ijaw ethnic group, constituting 48.2% including Epie (9.5%), Nembe (8.8%), Ogbia (4.6%), of the sample, other prominent ethnic groups and Igbo (6.5%). The remaining ethnic groups, such as Urhobo, Yoruba, Ekwere, Kalabari, Efik, Tiv, and Hausa, have smaller frequencies ranging from 0.9% to 5.6%.

Overall, this analysis of the socio-demographic profile of the respondents provides valuable insights into the characteristics of the surveyed population. The distribution of respondents across various variables showcases the diversity within the sample, allowing for a comprehensive understanding of their backgrounds and characteristics in the context of the study.

Objective 1: This objective sought to document the prevalence of drug abuse among young females in Bayelsa State. The data presented in Table 2 provides insights into the prevalence of drug abuse among young females. Out of the 216 participants surveyed, the vast majority (97.7%) reported being aware of drug abuse, indicating a high level of awareness within this demographic population. Only a small percentage (2.3%) stated that they had not heard about drug abuse before. Sources of information on drug abuse included social media (25%), family (17.1%), and TV (17.1%). Other sources included radio, worship centers, seminars, books,

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friends, neighborhoods, schools, and family discussions. This suggests that young females receive information about drug abuse from multiple channels, highlighting the importance of a comprehensive approach to drug education and prevention.

Regarding drug usage, the data reveals that 94.9% of the participants reported using any type of drug, while 5.1% acknowledged having not used drugs in the past. Reasons for drug use varied among respondents, with to feel high (13.2%), feel among (12.2%) and contraceptive after sex (10.2%) being the most common reasons reported. This highlights the need for targeted interventions and support for addressing the issue of drug abuse among young females.

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Table 2: Prevalence of drug abuse among young females

Variables	Frequency	Percentage (100%)
Have you heard about drug abuse before?		
Yes	211	97.7%
No	5	2.3%
How did you get to be informed about drug abuse?		
Family	37	17.1%
Social media	54	25%
TV	37	17.1%
Radio	18	8.3%
Worship centre	12	5.6%
Others (Seminar, Book, Friends, Neighborhood, School, Family gist).	58	26.9%
Have you used any type of drug before now?		
Yes	205	94.9%
No	11	5.1%
Why did you take it?		
Health issue	10	4.9%
Feel among	25	12.2%
Performance	13	6.3%
Anti malaria	20	9.8%
Contraceptive after sex/pregnancy protection	21	10.2%
To fight depression	5	2.4%
To feel high	27	13.2%
No response	84	41%
How often did you take it?		
Just once	26	12.7%
Sometimes	101	49.3%
Once in a while	70	34.1%
Always	8	3.9%
Where you influenced by someone to start taking drugs		
Yes	55	26.8%
No	150	73.2%
No response	11	20%
If yes, what was your relationship with this person?		
Friend	25	45.5%
Family	5	9.1%
Roommate	2	3.6%
Fiancée	2	3.6%
Brother	4	7.3%
Musician	2	3.6%
Doctor	4	7.3%

Source: Field Survey 2023

When examining the frequency of drug use, the data shows that among those who admitted to drug use, 12.7% reported using drugs just once, 49.3% reported using drugs sometimes, 34.1% reported using drugs once in a while, and 3.9% reported using drugs always. This information provides insights into the patterns and behaviours associated with drug use among young females.

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The survey also explored the influence of others on starting drug use. It was found that 26.8% of the respondents were influenced by someone to start taking drugs, while the majority (73.2%) reported no influence. Among those influenced, friends (45.5%) were the most commonly mentioned influencers, followed by family members (9.1%) and brother/doctor (7.3%). This suggests the potential impact of social relationships on drug initiation among young females.

In conclusion, the analysis of Table 2 reveals that drug abuse is prevalent among young females surveyed. The findings emphasize the importance of comprehensive drug education, prevention efforts, and support systems targeting specific health concerns. Addressing the influence of peers and promoting healthy relationships can also play a crucial role in preventing drug abuse among young females.

Objective 2: This objective sought to outline the types of drugs abused by females in Bayelsa State. Respondents were asked to select as many as applied to them. The provided data presents the frequencies and percentages of respondents who reported using specific types of drugs and those who observed other young females abusing these drugs. Among the respondents, 36% reported using alcohol, making it one of the most commonly used substances. Multivitamins were used by 73.1% of respondents. Ampiclox was used by 37.6% of respondents, while Paracetamol was the most commonly used, with 80.5% reporting its usage. Illicit drugs such as cocaine and heroin were reported at lower frequencies, with only 1.5% and 2% of respondents, respectively, acknowledging their use. Codeine was used by 10.2% of respondents, followed by Tramadol at 5.4%. Cannabis, an illicit drug, was reported by 11.2% of respondents, while nicotine had a usage rate of 1% and syrup, was used by a small proportion of respondents at 0.5%.

Regarding the observation of drug abuse among other young females, the data reveals that alcohol was the most frequently observed substance, with 54.6% of respondents reporting witnessing its abuse. Multivitamins were observed being abused by 50.2% of respondents. Ampiclox, Paracetamol, and codeine were also reported as drugs that other young females abused, with percentages of 19%, 45.4%, and 29.3%, respectively. Illicit drugs like cocaine and heroin were observed being abused by 7% and 4% of respondents, respectively. Tramadol

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and cannabis were reported as drugs of abuse by 21.5% and 39% of respondents, respectively. Morphine and nicotine were observed being abused by smaller proportions, with percentages of 3% and 7%, respectively. The data shows that there is a high usage of illicit drugs by females in the state.

Table 3: The Types of Drugs Abused by Females

Variables	Frequency (216)	Percentage (100%)
Which of these types of drugs have you used?		
Alcohol	81	36%
Multivitamin	150	73.1%
Ampiclox	77	37.6%
Paracetamol	165	80.5%
Cocaine	3	1.5%
Heroin	4	2%
Codeine	21	10.2%
Tramadol	11	5.4%
Cannabis	23	11.2%
Nicotine	2	1%
Syrup	1	0.5%
Which of these drugs have you seen other young females like you use?		
Alcohol	112	54.6%
Multivitamin	103	50.2%
Ampiclox	39	19.%
Paracetamol	93	45.4%
Cocaine	14	7%
Heroin	8	4%
Codeine	60	29.3%
Tramadol	44	21.5%
Morphine	6	3%
Cannabis	80	39%
Nicotine	14	7%

Source: Field Survey 2023

This analysis highlights the prevalence of substance use and abuse among the surveyed population. While multivitamins, Paracetamol, and alcohol were commonly used, illicit drugs had lower usage rates. Additionally, alcohol, multivitamins, Paracetamol, codeine, tramadol, and cannabis were the substances most frequently observed being abused by other young females.

Objective 3: This objective sought to investigate the negative impact of drug abuse among young females in Bayelsa State. Among the respondents in table 4, 69% reported experiencing irrational behaviour as a negative effect of drug abuse, while 31% reported not experiencing this effect. Financial challenges related to overspending on drugs were reported by 23.6% of

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respondents, with 76.4% stating they did not face this challenge. Physical unwellness was reported by 38.4% of respondents, while 61.6% reported not experiencing physical unwellness due to drug abuse.

Table 4: Negative Impact of Drugs among Young Females

Variables		Frequency	Percentage (100%)
Which of these negative effects have you experienced as a result of drug abuse?			
Causing you to act irrationally	Yes	149	69%
	No	67	31%
Financial Challenge (Over spending on drugs)	Yes	51	23.6%
	No	165	76.4%
Physical unwellness	Yes	83	38.4%
	No	133	61.6%
Lack of proper relationship with family members	Yes	30	13.9%
	No	180	83.3%
	No Response	6	2.8%
Weak social relationships caused by low self-esteem.	Yes	31	14.4%
	No	185	85.6%
Social stigma	Yes	31	14.4%
	No	185	85.6%
What makes you continue the abuse of drugs?			
Addiction	Yes	39	18.1%
	No	112	51.8%
	No response	65	30.1%
Pleasure	Yes	69	31.9%
	No	91	42.1%
	No response	56	26%
Temporal relief	Yes	87	40.3%
	No	69	31.9%
	No response	60	27.8%
Relaxation	Yes	63	29.2%
	No	82	38%
	No response	71	32.8%

Source: Field Survey 2023

Lack of a proper relationship with family members was reported by 13.9% of respondents, while 83.3% stated they did not face this issue. Weak social relationships caused by low self-esteem were reported by 14.4% of respondents, with 85.6% reporting no impact on social relationships due to low self-esteem. Social stigma was reported by 14.4% of respondents, while 85.6% stated they did not experience social stigma due to drug abuse.

In terms of the reasons for continuing drug abuse, 30.1% did not respond to this question; however, addiction was reported by 18.1% of respondents, while 51.8% denied being addicted to drugs. Pleasure was reported as a reason for continuing drug abuse by 31.9% of

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respondents, while 42.1% stated that pleasure was not a contributing factor. Temporal relief was reported by 40.3% of respondents, with 31.9% stating it was not a factor. Relaxation was reported by 29.2% of respondents, while 38% denied using drugs for relaxation purposes. This analysis sheds light on the negative effects experienced by respondents due to drug abuse and the reasons behind their continuation of drug abuse. It is important to note that the data is based on self-reported responses, which may be subject to individual perceptions and biases. Further research and analysis would be required to gain a deeper understanding of the underlying factors contributing to drug abuse and the associated negative effects.

Objective 4: This objective sought to proffer possible solutions to drug abuse among young females in Bayelsa State.

Table 5: Possible Solutions to Drug Abuse among Young Females in Bayelsa State

Variables	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
Parents should educate their children early enough on the risk associated with drug abuse.	190 (88%)	17 (7.8%)	6 (2.8%)	3 (1.4%)	—
Enlightenment against drug abuse through the use of mass media.	156 (72.2%)	43 (20%)	7 (3.2%)	7 (3.2%)	3 (1.4%)
Sensitization programs on the effect of drug abuse on the individual and society.	154 (71.3%)	41 (19%)	6 (2.8%)	5 (2.3%)	10 (4.6%)
Creation of health promoting programs by NGOs and the government.	160 (74.1%)	33 (15.3%)	7 (3.2%)	3 (1.4%)	13 (6.0%)
There should be therapeutic community programmes that emphasize socialization, life style modifications and behavioural change.	152 (70.3%)	42 (19.4%)	6 (2.8%)	4 (1.9%)	12 (5.6%)

Source: Field Survey 2023

Table 5 shows data on the possible solutions to drug abuse. The majority of respondents strongly agreed (88%) that parents should educate their children early on the risk associated with drug abuse. Additionally, 72.2% of respondents agreed with enlightenment against drug abuse through mass media. Moreover, 71.3% of respondents support sensitization programs on the effect of drug abuse on individuals and society. Similarly, 74.1% of respondents favour the creation of health promoting programs by NGOs and the government. Lastly, 70.3% of respondents believe in the implementation of therapeutic community programs that emphasize socialization, lifestyle modifications, and behavioural change.

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DISCUSSION

Findings from this study indicated that drug abuse is a common phenomenon and is prevalent among young females in Bayelsa state. World Health Organization (2019) recorded that out of every 4 people abusing drugs in Nigeria, one is a female. Earlier studies have also recorded a prevalence rate of 15% (Jatau et al., 2021). Furthermore, this study found out that among other things, the desire to feel high and feel among were the top reasons for abusing drugs. Adegoke, (2021) on the other hand found frustration, unemployment and peer group influence as reasons why people engage in drug abuse.

It has been recorded that women are more likely to misuse prescription drugs (UNODC, 2015), this supports the findings from this study which showed that prescription drugs such as paracetamol, multivitamin and ampiclox were the drugs mostly abused. Also, illicit drugs such as tramadol, codeine and cannabis are commonly abused by young females in Bayelsa state; several other studies have found similar results. Adegoke (2021) recorded tobacco, codeine, and marijuana and Ray et al. (2004) recorded alcohol, pain-killers, heroin and cannabis. Previous studies also revealed the various forms in which cannabis is being packaged, ranging from cakes, cookies, tablets and sweets, with the sole aim to deceive members of the public (NDLEA Today, 2021). According to UNODC (2017), there are more women than men injecting tranquilizers and opioids in Nigeria, of which 4.6 million are addicted to tramadol and 10.6 million to cannabis (NDLEA Today, 2021). Other unconventional substances that were recorded in other studies were suck-away, sewer gas (hydrogen sulfide gas), premium motor spirit (PMS), and shoe polish (Aliyu et al., 2015). These chemicals are sniffed in other to get high; although none of these were recorded in this study. Results further showed that 12% used drugs once, 51.9% sometimes, 32.4% once in a while, and 3.7% always. This correlates with Newman & Mello (2009) who found that women engage in the nonmedical use of prescription opioids more on a regular basis.

Results from this study shows that the major negative effect of drug abuse as experienced by young females in Bayelsa state is that the drug causes them to act irrationally. This aligns with previous studies that recorded behavioural and mental health problems as negative consequences of drug abuse (Ochuko, 2021, Abdullahi, et al., 2023). Although not found in this study, several others outlined the negative consequences of drug abuse to include distorts

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family unity and peace (Abdullahi, et al., 2023; WHO, 2019), escalates violence against women and insecurity (King & Chassin, 2014), high risk of breast cancer, gastric ulcers and liver cirrhosis (Canadian Community Health Survey, 2000), also, for women of reproductive age, health challenges such as poor foetal growth, stillbirths, maternal death, preterm births and neonatal abstinence syndrome (WHO, 2019) are some of the negative consequences of drug abuse. One of the major reasons why drug abuse still prevails in spite of its negative consequences is because its abusers take them to gain temporal relief. Haladu (2003) made similar findings as he recorded that that narcotics are used to relieve pains, induce sleeping and they are addictive, hence leading to self medication.

Abdullahi (2023) outlined the efforts of the National Drug Law Enforcement Agency (NDLEA) in dealing with drug abuse. They noted that several activities such as sensitization campaigns, workshops and seminars are being organized across the country. They also acknowledged the collaboration of non-governmental organizations, treatment centres and relevant agencies in rehabilitating drug users, rectifying behaviours, instilling better coping mechanisms and teaching drug users how to prevent relapse. Respondents from this study vetted similar solutions to this menace of drug abuse. Results from this study shows that in other to solve the problem of drug abuse among females, it was strongly agreed that parents should educate their children early enough on the risk associated with drug abuse, enlightenment and sensitization programmes should be organized, health promotion programs should be created and therapeutic community programmes that emphasizes socialization, life style modifications and behavioural change be organized.

These suggestions cited above are in synch with Pentz (2007) who stated the best approach to addressing drug addictions should encompass mass media campaigns, school-based educational programs, parental involvement in their child's homework, community organizations and presentations, along with the implementation of health policies. While Adegoke (2021) called on the government, religious organizations and parents to take responsibility in the fight against drug abuse, the WHO (2019) highlighted resource mobilization, capacity building and advocacy in ensuring promotion of evidence-based prevention activities at the community level.

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CONCLUSION

In conclusion, the survey findings highlight the prevalence of drug abuse among young females and the importance of addressing this issue. While a majority of the participants were aware of drug abuse and had not used drugs, a significant portion acknowledged drug usage. The data provides insights into the types of drugs commonly used, the reasons behind drug use, and the frequency of drug use among this population. It also emphasizes the influence of social relationships on drug initiation. Alcohol, multivitamins, Paracetamol, and cannabis were the most commonly reported substances, with concerns raised about the high rates of alcohol and cannabis abuse. The negative effects experienced by respondents further emphasize the need for comprehensive approaches to prevention, education, and support systems to address drug abuse among young females. These findings can guide the development of evidence-based interventions and strategies aimed at promoting responsible drug use, addressing specific health concerns, and improving mental well-being in this population.

RECOMMENDATIONS

Based on the conclusion reached in this study, the following recommendations have been made;

1. Implement enlightenment campaigns against drug abuse through mass media to raise awareness and educate the public about the dangers of drug abuse.
2. Establish health-promoting programs by NGOs and the government to address drug abuse and promote overall well-being.
3. Emphasize the importance of personal discipline and moral values within families to prevent drug abuse.
4. Avoid stigmatizing individuals struggling with drug abuse and promote a supportive and non-judgmental approach to help them seek treatment and recovery.
5. Promote responsible drug use by educating individuals about moderation, avoiding overindulgence, and understanding the potential risks of drug misuse.

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6. Provide employment opportunities and skills acquisition programs for youth to reduce their vulnerability to drug abuse and promote positive life choices.

LIMITATIONS OF THE STUDY

Throughout the research project, the researcher faced certain constraints that were beyond their control. One significant limitation was the challenge of getting respondents to complete the online questionnaire. While the majority of respondents did submit their answers, a considerable number of them did so without carefully reading the questions, resulting in inaccurate responses that were unsuitable for the final analysis. Moreover, respondents' delayed responses to the online questionnaire on Google Forms further contributed to the delay in data collection for the study.

CONTRIBUTION TO KNOWLEDGE

The study has made significant contributions to knowledge in several key areas. Firstly, it has provided valuable insights into the level of awareness and prevalence of drug abuse among young females in Bayelsa State. The study has identified common sources of information, such as social media, family, and TV, which can be utilized to design targeted awareness campaigns to educate and prevent drug abuse among this demographic.

Secondly, the research has shed light on the drug usage patterns among young females in the region, revealing a notable percentage of respondents reporting drug use. The study has identified the most commonly used drugs, including multivitamins, Paracetamol, alcohol, Tramadol, cannabis, and codeine. Furthermore, the reasons behind drug use, such as self-medication for anti-malaria and fighting depression, have been uncovered. This information can be utilized to develop interventions aimed at addressing underlying issues and reducing drug misuse.

Thirdly, the study has delved into the negative impacts of drug abuse, highlighting the importance of understanding individual variations in the effects of drug use. The research has identified common negative consequences, such as irrational behaviour, financial challenges, physical unwellness, and strained family and social relationships. This knowledge can be instrumental in customizing intervention programs and support services to address the specific challenges faced by individuals experiencing drug-related issues.

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Lastly, the study has presented various suggestions from respondents on effective strategies to combat drug abuse. These suggestions encompass a comprehensive approach involving education, regulation, community engagement, and law enforcement. Policymakers and stakeholders can use these insights to design evidence-based strategies that effectively curb drug abuse and promote a drug-free society, aligning with recommendations from previous research.

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