

Changing Patterns of Substance Consumption Among Females in Nigeria: An Exploration of Contributing Factors and Consequences

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Abstract

The study investigates the changing patterns of substance consumption among females in Nigeria to explore the contributing factors and consequences. It also examines the commonly abused substances among female youths, both locally and industrially processed, as well as the means of accessing these substances, the predisposing factors, the effects of substance abuse on female youths, and the challenges law enforcement agencies face in curtailing female substance abuse. The study adopts Merton's structural-strain theory and Sutherland's differential association theory. The findings reveal that pharmaceutical drugs such as cough syrups containing codeine, Roche, Rafenol, Tramadol, Emzol-5 tablets, cigarettes, and alcohol are commonly abused by female youths. Additionally, local substances such as Indian hemp, *Babba juji*, *Giyan duma*, *Giyna makarho*, *Ogogoro*, *Burutu*, and lizard excreta are also abused, though to a minimal degree. The study further reveals that many of these substances are obtained from patent medicine shops and other dealers in town. Moreover, it identifies several predisposing factors contributing to female youths' involvement in substance abuse to include peer group influence, poor parental control, life frustration, proximity to locations where substances are sold and abused, betrayal by boyfriends, government failure to address the issue, and the insincerity and corruption of law enforcement officials. The study recommends that addressing the menace of substance abuse requires collective efforts from the government, civil society organizations, NGOs, FBOs, parents, guardians, and other members of society.

Keywords: Drugs, Substance, Substance Abuse, Youths, Patterns, Females

Introduction

Since time immemorial, people across human societies have identified and used plants and other substances that alter their health conditions and state of consciousness (Edwards, 2024). Some of these substances are drugs that individuals ingest, inhale, absorb, or apply to their bodies. These substances, often industrially processed chemical components, are capable of affecting an organism's physiological and psychological functions. They include all kinds of medicine, such as tablets, syrups, balms, and capsules, which are sold at patent medicine stores, pharmaceutical shops, and by itinerant street hawkers. Additionally, both locally and industrially processed or produced substances such as beverages, chemicals, marijuana, cigarettes, alcohol, and leaves or bark of trees are also included. If misused or abused, these substances can be harmful, and continuous use may lead to addiction.

Epenyong (2022) defines substance abuse as the excessive and persistent self-administration of any drug without due regard for accepted medical practice. Substance abuse has become a widespread and alarming global phenomenon (Dukku, 2010). In Nigeria, general observations indicate that some individuals procure and use substances for nearly every activity they engage in.

This issue is particularly prevalent in many Nigerian states, especially among adolescents and young people of both sexes, who constitute the high-risk group. Research data shows that those most affected by substance abuse fall within the age bracket of 10 to 35 years (Balogun, 2023). Substance abuse is one of the most pressing social problems of the modern era, affecting both developed and developing nations (Shehu, 2012). It is also associated with various criminal activities, including murder, armed robbery, suicide bombing, violence, and political thuggery (Abudu, 2008).

Statement of the Problem

Substance abuse, in any form, is a social menace that threatens an abuser's personal development, damages a family's reputation, and disrupts a society's socio-economic, cultural, and political structures. This issue has become a contemporary global problem, as it is found in all societies. While substance abuse was previously associated mainly with males, the alarming rate at which young women aged 18 to 25 are now abusing industrially processed drugs and other intoxicating locally processed substances is concerning. This trend has numerous negative consequences on societal progress. For instance, Siro (2008) identifies violence, high divorce rates, and marital instability as some of the side effects of substance abuse. Siro further asserts that even married women engage in substance abuse. Moreover, the abuse of various substances among female youths has become particularly common, especially concerning pharmaceutical drugs. Substance abusers engage in this behavior for multiple reasons, and the availability of a wide variety of drugs, the numerous means of accessing them, and other influencing factors continue to undermine law enforcement efforts to address the issue (Egbonu *et al.*, 2024).

In Nigeria, drug substances are being widely abused, and access to them varies. Magaji (2012) reports several ways in which users obtain these substances, including through friends, patent medicine shops, secret dealers, mammy markets, and even security personnel. Furthermore, some official law enforcement agents, including members of the NDLEA and other collaborative agencies tasked with controlling this menace, are suspected of being involved in the act. The increasing involvement of female youths in substance abuse has placed an additional burden on these agencies, exacerbating the issue of substance abuse in society.

The first large-scale, nationwide survey by the World Drug Report (2023) to examine the extent and patterns of drug/substance use among females in Nigeria. The results of this survey aim to provide the baseline information needed for the design and implementation of effective prevention, treatment, and care services that are evidence-based and targeted to reduce the demand for drugs/substances and prevent the morbidity and mortality attributed to substance use in Nigeria. The results of the survey highlight a considerable level of year 2022 use of psychoactive substances in Nigeria, in particular the use of cannabis, the non-medical use of prescription opioids (mainly tramadol and, to a lesser extent, codeine or morphine), and cough syrups (containing codeine or dextromethorphan).

According to the World Drug Report (2023), in 2022, the prevalence of any drug use in Nigeria is estimated at 14.4 per cent, or 14.3 million people aged between 15 and 64 years. The extent of substance use in Nigeria is comparatively high when compared with the 2020 global annual prevalence of any drug use of 5.6 percent among the adult population. The past year 2022 prevalence of psychoactive substances excluding alcohol, overall was higher among men in Nigeria, however the gender difference in the non-medical use of prescription opioids, tranquilizers and cough syrups was less marked. Drug/substance use was most common among

those who were between the ages of 25 and 39 years, while the rates of past-year use were lowest among those who were below 24 years of age. Cannabis was the most commonly used drug, followed by opioids, mainly the non-medical use of prescription opioids and cough syrup (Magaji, 2012 & Dukku, 2012).

The key finding of the World Drug Report (2023) reveals a dichotomy in the past year's (2022) prevalence of drug/substance use between the North and South geopolitical zones. The highest past-year prevalence of drug use was found in the southern political zones: South-East, South-West, and South-South zones (past year prevalence ranging between 13.8 – 22.4 per cent of the population) compared to the North (ranging between 10 - 14.9 per cent of the population).

The recent rise in female substance abuse contrasts with past trends, where such behaviors were predominantly associated with males (Musa, 2012). This shift may lead to an increase in deviant activities within society. If substance abuse among females continues, its effects will extend beyond the individuals involved, affecting their children and society at large. This necessitates an investigation into the most commonly abused substances among female youths, the means through which they access these substances, the factors predisposing them to substance abuse, its effects, and the challenges law enforcement agencies face in tackling this growing problem in Nigeria.

Theoretical Framework

The relevance of theory is very important in all social science studies. This study is no exception. Many theories are related to substance abuse among females, such as social control theory, social learning theory, and modified social stress model (MSSM), but differential association theory and structural-strain theory will be reviewed to aid the understanding of the study. However, structural-strain theory and differential association theory were adopted as the framework of the study.

Structural Strain Theory

Structural Strain Theory was developed by Robert K. Merton (1910-2003) to explain why deviant behavior occurs in society. The theory argues that the social environment influences people's behaviors and shapes their attitudes toward culturally defined goals and the institutionalized means of achieving those goals. In attempting to achieve these goals, individuals may conform to or deviate from cultural expectations. According to this theory, people who aspire to culturally prescribed goals but are denied the opportunity to achieve them experience what Merton termed "social strains." These strains lead some individuals to turn to deviant acts as a means of coping with their limited access to legitimate opportunities.

Merton identified five basic forms of adaptation: conformity, which aligns with social norms and is the opposite of deviance; innovation, where individuals accept societal goals but use improper means to achieve them. For example, a female youth whose parents cannot provide for her material needs may be lured into deviant behaviors such as substance abuse, particularly when influenced by friends. Similarly, a young woman forced into marriage against her will may experience frustration and resort to substance abuse, while another who suffers maltreatment from a stepmother in the absence of her biological mother may turn to substance abuse as a coping mechanism. Other adaptations include ritualism, where individuals accept societal means but reject its goals; retreatism, which involves rejecting both goals and means; and rebellion, where individuals reject both and propose alternative goals and means.

According to this theory, if society denies people the opportunity to achieve success through socially approved means, some individuals will choose illegitimate avenues to attain societal goals, such as happiness, satisfaction, and pleasure. This could explain why some female youths engage in substance abuse, leading to challenges such as difficulty finding spouses, addiction, and adverse health effects.

Differential Association Theory

Differential Association Theory, developed by Edwin H. Sutherland (1883-1950), explains why deviant acts occur in society. This theory assumes that humans are born neutral and learn behaviors, beliefs, and tendencies from their social environment. The theory has nine key assumptions, with the main argument being that deviant behaviors are learned through interaction, just like any other normative behavior. A person becomes deviant when they are exposed to an excess of definitions favorable to violating the law compared to those unfavorable to violating it. For instance, a female youth may engage in substance abuse due to the widespread availability of different substances in society, peer influence, or a desire to fit in and satisfy curiosity.

Although these theories emphasize social and environmental influences in predisposing individuals to deviance, they fail to account for other contributing factors such as biological, physical, and psychological influences. For example, Differential Association Theory's assumption that humans are born neutral can be criticized, as some individuals may be predisposed to criminal behavior from birth rather than learning it through interaction. Similarly, Structural Strain Theory's assertion that deviance arises due to societal strains overlooks cases where individuals from wealthy backgrounds engage in substance abuse for reasons unrelated to economic hardship. Despite these criticisms, both theories remain relevant in addressing the issue under study.

Commonly Abused Substances

A study by Musa (2012) on Benylin consumption among females in the Tarauni Local Government Area of Kano State indicates that the majority of respondents, constituting 65%, abused Benylin. The study further revealed that most of these respondents were introduced to the substance by their friends, either in school or outside of school, and that they predominantly fell within the 18–23 age bracket. Similarly, Siro (2008) identified the most commonly abused substances in Kano, which include cough syrup with codeine, Indian hemp, rubber solution, and 'Gadagi,' while heroin, cocaine, and Roche recorded lower abuse rates. Bashiru and Dagashi (2014) also highlighted non-medical substances used by youths, such as *Hankufa* (*Waltheria americana*), *Goro* (kola nut), *Tabagari* (powdered tobacco), and *Dan Kamaru* (a bitter root imported from Cameroon). According to Coleman (2010), findings from NDLEA's yearly drug abuse data (2000, 2002, 2006, and 2007) reveal a significant increase in cannabis abuse among Nigerian youths.

In a study of 400 students at Usmanu Danfodiyo University, Sokoto, Magaji (2012a) found that 58.8% of female respondents abused codeine, 35.7% used amphetamines, 13.3% consumed alcohol, 7.8% used marijuana, 20% inhaled substances, 25% took cocaine, and 11.1% used solvents. Shehu (2012) further reports that cough syrups containing codeine have become a popular drug of abuse in Nigeria, particularly among both in-school and out-of-school youths, as well as adults in their homes. Radda (2006) argues that in certain parts of Nigeria, alcohol is primarily used during ceremonial festivals and religious rituals. He further states that in northern Nigeria, particularly Kano, kola nut—which contains caffeine—is commonly used, especially by older individuals and during ceremonies. Tobacco smoking is also prevalent among Nigerians, with the recent rise in Benylin abuse, especially among young females, being a cause for concern (Radda, 2006).

A study by Okaza and Aluede (2009) on drug abuse among students at Ambrose Ali University, Ekpoma, found that substances used by respondents included alcohol (25%), marijuana (32%), cocaine (9%), kola nuts (8%), tobacco (7%), Librium (2%), Valium (1%), dexamphetamine (9%), Reactivan (2%), Mandrax (1%), and Chinese capsules (4%). Similarly, Fatoye and Morakinyo

(2012) reported the prevalence rates of commonly abused drugs as follows: salicylate analgesics (40.7%), stimulants (20.9%), antibiotics (16.5%), alcohol (13.4%), hypnotosedatives (6.4%), and tobacco (3.0%). Abudu (2008) observed that many Nigerian youths unknowingly depend on various drugs for daily activities, including education and politics. These substances include tobacco, Indian hemp, cocaine, heroin, alcohol, amphetamines, and caffeine.

In a study of 150 youths randomly selected from secondary schools in Abuja, Wilfred (2009) found that youths from upper-class backgrounds abused medicinal substances (15%), non-medicinal substances (20%), hard drugs (65%), and other substances (10%). Among middle-class youths, medicinal substance abuse was 25%, non-medicinal 30%, hard drugs 45%, and other substances 50%. For lower-class youths, medicinal substances were abused at 30%, non-medicinal at 35%, hard drugs at 20%, and other substances at 10%.

Dukku (2012), in his study of *Gadagi* consumption among youths in Kano, reported that new patterns of drug use are emerging across different societies. In Nigeria, apart from leaves, roots, and tree barks, other substances being abused include rubber solution (*Sholisho*), solvents, glue, *Zakami*, *Dankamaru*, *Madarar Sukudaye*, *Kunun Dodo*, *Robin Blue* (a whitening agent for clothes), offensive odors from pit latrines, perfumes, gasoline, and even cement. One particularly concerning trend in Kano is the emergence of *Gadagi*, a traditional Hausa tea made by boiling leaves with other stimulating substances. Before *Gadagi* became popular as a substance of abuse, several other traditional drugs and consumables existed. WHO (2010), as cited in Dukku (2012), clarifies that in northern Nigeria's drug market, amphetamines are referred to as *Ajigarau*, alcohol as *Ruwa* or *Rowan Tsami*, marijuana as *Ganja*, *Moli*, or *Moro*, and cocaine as *Tabar Aljannu* or *Hodar Ibilis*.

Oladele and Olufunmilayo (2013) identified the most commonly abused substances as analgesics, cannabis, tobacco, alcohol, and sedatives. Similarly, Egbuoma, Chukwuma, and Uwaka (2004) found that 38.3% of their respondents used tobacco, 35.2% consumed alcohol, and 27.4% used sedatives. A study by Eneh and Stanley (2004) on substance use patterns among secondary school students in Rivers State revealed an alcohol use prevalence of 65%. Imbosa (2022) found that the most commonly used substances were alcohol (44%), cigarettes (31%), cannabis (11%), and stimulants (2%). Yusuf (2010) also noted that alcohol is the most abused substance on Nigerian campuses.

Similarly, Ayatse (2005) stated that intoxicating wine prepared with hallucinogenic drugs, such as Indian hemp and cocaine, is a requirement for cult initiation. Gikonyo (2019) reported that a 2010 survey in the UK revealed that over five million people used cannabis, one million used amphetamines, nine hundred thousand used LSD, and over five hundred thousand used ecstasy.

Access to Substances of Abuse

Hynd (2017) identifies two major factors contributing to drug abuse in Nigeria: supply and demand. The supply side includes factors such as factories, patent medicine stores, hospitals, drug traffickers, cannabis dealers, and inadequately prepared law enforcement agencies, all of which facilitate drug distribution. The demand side, on the other hand, relates to factors influencing an individual's likelihood of abusing a particular drug.

Bukarti (2009) and Edwards (2024) report that despite restrictive laws, various drugs remain readily available in Nigeria. Sedatives and stimulants, for instance, are easily accessible in shops, mobile stalls, patent medicine stores, and open markets. These researchers argue that Nigeria's socio-economic conditions further enhance the likelihood of drug abuse. Dukku (2012) asserts that

drug abuse can only occur when substances are available. He further explains that literature on drug use consistently emphasizes that the opportunity to consume a drug depends on its availability. Without easy access, drug abuse would not occur.

Studies by Dukku (2012), Hynd (2017), and Bukarti (2009) reveal that female youths often access substances of abuse due to their widespread availability in places such as patent medicine stores, motor parks, and from unlicensed drug sellers and hawkers. Additionally, weak legal frameworks and poorly enforced laws in Nigeria hinder efforts to control the circulation of these substances. Shehu (2012) also points out that when drugs are easily accessible and unregulated, people are more likely to abuse them. This is particularly evident in Nigeria, where substances such as codeine and Roche are readily available to female youths. Johnston (2015) further notes that drug dependence is facilitated by sources such as patent medicine shops, unlicensed mobile sellers (operating via bicycles, motorcycles, or vehicles), and street hawkers.

Masita (2024), in his study on opiate addiction in Asia, observed that opium-bearing plants were easily available to farmers in Southeast Asia, making them prone to opium addiction. While his findings focused on Asia, the same logic applies globally, including in Nigeria, where female youths have increasing access to substances of abuse.

Predisposing Factors for Substance Abuse

Various factors have been proposed to explain the causes of deviant acts in general and drug abuse in particular. Durkheim introduced the term “anomie” to describe the breakdown of social norms, which he argued leads to deviant behavior such as drug abuse and theft. In his work “Suicide,” he contended that deviance results from social and personal disorganization. He explained that in times of stability, societal norms are clear and widely followed. However, during periods of social upheaval, individuals experience confusion, making it difficult to distinguish between acceptable behavior and deviant acts. Consequently, some individuals deviate from social norms, engaging in substance abuse, prostitution, and theft, particularly among female youths (Oshiokoya, 2016).

Imbosa (2022) reported that earlier studies on substance abuse in Nigeria revealed that the country is an achievement-oriented society where financial success is highly prioritized. The pursuit of wealth often leads individuals to adopt unethical means to attain it, a phenomenon widely tolerated by society. Consequently, drug users—including students, commercial motorcycle riders, sex workers, and long-distance drivers—consume substances not for medical reasons but to cope with the hardships of their professions and strive for material success. This may explain why some female youths abuse substances such as codeine, Rafenol, Roche, and Tramadol.

Epenyong (2022) observed that Nigeria’s power structure and wealth distribution create fertile ground for deviant behaviors, such as substance abuse. The country’s high level of economic inequality results in social strain, particularly among the economically disadvantaged. Due to personality differences, some individuals react negatively to these strains and resort to self-destructive behaviors like substance abuse. Similarly, Merton (1947) argued that deviant acts stem from the social strain faced by individuals struggling to achieve societal goals through legitimate means.

Salaam (2021) linked deviant behaviors, such as drug abuse, to poverty and unemployment, which create an environment of frustration and increased stress. In a country without social welfare provisions, these challenges intensify feelings of hopelessness, particularly among Nigerian youth, leading to substance abuse. Epenyong (2022) noted that drug abuse is a learned behavior, similar to other normative behaviors. If drug use provides reinforcement or satisfaction, individuals are

likely to persist in its use. He distinguished between primary reinforcers (events that inherently provide reward) and secondary reinforcers (learned rewards). His argument aligns with Sutherland (1939), who proposed that deviant behaviors, including substance abuse among female youths, are learned through social interaction.

Wilfred (2009) observed that Nigerian youths, particularly females, engage in substance abuse as a means of asserting independence or expressing hostility toward authority figures. Adolescents often dwell in fantasy worlds, making them susceptible to substance abuse, including alcohol and hard drugs. Some youths, regardless of gender, use substances to alleviate stress, though this provides only temporary relief. Additionally, sexual inadequacies may drive individuals to use stimulants (Weeks, 2021).

Peer influence is a significant factor in youth substance abuse. Epenyong (2022) highlighted the impact of social learning, where individuals adopt behaviors observed in their peers. Imbosa (2022) noted that individuals who do not initially smoke may adopt the habit through association with smokers, eventually becoming chain smokers. He further reported that exposure to promiscuous behavior, sexual perversion, and substance abuse through media influences female youths to imitate movie stars, leading to addiction. Wilfred (2009) supported this view, aligning with reports by Hynd (2017) and Imbosa (2022) that linked substance abuse to peer influence. Epenyong (2024) explained substance abuse among Nigerian female youths as a consequence of socio-political imbalances, societal pressure to achieve success through education and wealth, rapid social change, exposure to foreign cultures, inadequate governance, and the breakdown of family structures and morality. He further argued that Nigeria's political, economic, and social systems marginalize the majority of the population, denying them opportunities for legitimate social integration. This marginalization fosters deviant behaviors, including substance abuse. Imbosa (2022) asserted that no single factor solely accounts for drug abuse. Contributing factors include personality defects (such as chronic inadequacy and poor frustration tolerance), societal belief in the magic of medicine, the pursuit of euphoria, youth disillusionment, the desire for heightened perception (particularly among music lovers), self-medication for psychological disorders, and a lack of alternative coping mechanisms. WHO (2014) summarized the causes of substance abuse as experimental curiosity, peer influence, lack of parental supervision, socio-economic conditions, and substance availability.

Effects of Substance Abuse

Substance abuse has numerous detrimental consequences. Abudu (2008) described drug abuse as a major threat to societal stability, undermining socio-political dignity, personality, and moral integrity. Shehu (2012) warned that drug abuse has led to a moral decline, increasing crime, insecurity, and social vices. Coleman (2010) observed that cannabis use initially induces stimulation, followed by relaxation and euphoria, but also causes negative effects such as drowsiness, bloodshot eyes, nausea, dizziness, and impaired coordination. The combination of multiple drugs, such as cocaine and marijuana, is particularly dangerous and may indicate underlying psychological issues.

Magaji (2012) identified academic problems, medical issues, crime, cultism, and mental disorders as consequences of substance abuse. His findings indicated that 26.5% of respondents had poor academic performance, while 22.4% suffered medical problems due to continued drug abuse. The Word Drug report (2025) noted that addiction is the most serious consequence, leading to both physical and psychological dependence. Garba (2005) reported that drug abuse contributes to

criminal activities, such as those carried out by "area boys," motorcyclists, and armed robbers. Some political organizers exploit drug users as bodyguards during violent rallies and campaigns. Oshikoya (2006) identified dependence and addiction as major consequences of drug abuse among Nigerian undergraduates. Obembe (2012) studied drug use in northwestern Nigeria, revealing that as of April 18, 2012, 41.9% of patients at the Federal Neuro-Psychiatric Hospital, Kware, Sokoto State, were admitted for drug-related cases. Other effects of drug abuse include academic failure, health deterioration, delinquency, social instability, and economic hardship.

Challenges Facing Law Enforcement Agencies

The effectiveness of law enforcement agencies in Nigeria is hindered by various challenges. Otegwu (2013) identified inadequate logistical support, corruption, flawed recruitment and training processes, and public apathy toward law enforcement. Abdu (2008) pointed out that operational logistics, such as patrol vehicles, weapons, and communication gadgets, are lacking. Alemika and Chukwuma (2008) noted that poor welfare packages foster corruption among law enforcement personnel, reducing efficiency.

Otegwu (2013) highlighted the underpayment of law enforcement officers, with only 30% receiving barrack accommodation. This financial hardship increases susceptibility to corrupt practices. Additionally, Nigerians often fail to provide law enforcement agencies with the necessary information to combat crime (Zuokumor, 2006). Flawed recruitment processes have also resulted in criminals infiltrating law enforcement agencies due to inadequate background checks (Otegwu, 2013).

The National Drug Law Enforcement Agency (NDLEA) suffers from underfunding, relying heavily on foreign donors (Emeka, 2014). Shehu (2012) noted that legal constraints prevent law enforcement from effectively addressing substance abuse, as some substances are not legally classified as illicit. Furthermore, political interference disrupts law enforcement operations, with politicians exploiting unemployed youths as drug-dependent political thugs (Gusau, 2021).

In conclusion, substance abuse among Nigerian youths, particularly females, is a growing crisis. This necessitates empirical research to identify commonly abused substances, contributing factors, accessibility, and the challenges law enforcement agencies face in addressing the issue. By understanding these aspects, alternative strategies can be developed to mitigate the problem effectively.

Conclusion

The study confirms the increasing prevalence of substance abuse among female youths in Nigeria, affecting both married and unmarried individuals. However, unmarried females constitute the majority of abusers. Commonly abused substances include pharmaceutical drugs such as cough syrup with codeine, Roche, and Rafenol, as well as locally processed drugs like Indian hemp, local beer (*Burukutu, Ogogoro, Giyan Babba Juji, Makarho, and Duma*), and even unconventional substances such as lizard excreta. Several factors contribute to substance abuse among female youths in Nigeria, including peer pressure, poor parental care, frustration, easy substance availability, and corruption among law enforcement agencies. The inability of law enforcement to combat substance abuse effectively is further exacerbated by inadequate resources and logistical challenges. To mitigate this crisis, a collaborative approach involving the government, public, parents, traditional and religious leaders, and law enforcement agencies is essential.

Recommendations

Based on the study's findings, the following recommendations are proposed to address substance abuse among youths, particularly female youths, in Nigeria:

- i. **Government Regulation:** The government must take urgent action to regulate the indiscriminate sale of substances prone to abuse. This can be achieved by classifying certain substances as controlled or illegal and banning their sale and use accordingly.
- ii. **Parental Responsibility:** Parents and guardians must actively engage in the proper socialization of their children by monitoring their peer associations and ensuring a nurturing home environment.
- iii. **Employment and Empowerment Programs:** The government, NGOs, and philanthropic organizations should provide employment opportunities, youth empowerment programs, and poverty reduction initiatives to reduce the economic motivations for substance abuse.
- iv. **Improved Law Enforcement Support:** Government agencies responsible for combating substance abuse should receive increased funding, modern equipment, and logistical support to enhance their efficiency.
- v. **Public Awareness and Campaigns:** Religious and traditional leaders, along with NGOs, should conduct extensive awareness campaigns using print and electronic media to educate the public on the dangers of substance abuse.
- vi. **Community Involvement:** The public must actively support law enforcement efforts by reporting incidents and providing relevant information to aid proactive measures against substance abuse.

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