

Assessment of Drug Addiction and Its Associated Factor among Youths in Nazareth Town, Eastern Shoa, Ethiopia

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Abstract

Background: Drug addiction is a condition which characterized by an overwhelming desire to continue taking a drug through which one has become habituated for repeated consumption. At present, drug addiction is one of the serious problems which affect not only the addicted people but also the society as a whole. This problem becomes common in Ethiopia recently which resulted in different socio economic problems. The problem of drug addiction is also common in Nazareth as social problem. The substance abuse includes Alcohol, chat, cigarette and others in the town. The objective of this study is to assess the level of drug addiction and it associated factor among youths in Nazareth Town Ethiopia.

Methods: community based cross sectional study design was used to conduct this study. A total of 406 youths were taken by systematic random sampling technique to conduct this study. Logistic regression and cross-tabulation was done to see the association between dependent and independent variables.

Result: Among 406 participants 283 (70%) are addicted for one or more than one substance. From the total addicted respondents 93 (23%) are females. The age distribution of drug addiction is almost similar with 205 (51%) among youths age 15 to 20 and 201 (49%) among youths age 21 to 24 years old. Most of the addicted are single (not married) 258 (63.5%).

Conclusion: The prevalence of substance use among youths in Nazareth town is high. The addiction varies from individual to individual. Most of the youths are addicted more than one drug. Some of the cause of drug addiction of youths in this study are enjoyment, unemployment, failure in academic achievement, family disagreement, Hopelessness and peer pressure. Seventy percent (70%) have positive attitude toward drug addiction.

Keywords: Drug addiction; Cross-sectional; Youth; Nazareth

Abbreviations

AIDS: Acquired Immune Deficiency Syndrome; MOY: Minster of Youth; WHO: World Health Organization; DA: Drug Addiction

Introduction

Drug addiction is a condition which characterized by an overwhelming desire to continue taking a drug through which one has become habituated for repeated consumption [1]. Drugs and substance abuse is a problem that has raised concern all over the world. At present, drug addiction is one of the serious problems which affect not only the addicted people but also the society as a whole [1,2]. Human beings have used drugs like Narcotics starting from 400 BC for medical purpose [3]. Marijuana has been dated to 273 BC in china but until 19th century was not considered as active substance in drug exertion [4]. Across the globe, alcohol and drug abuse is a major challenge to young people. Indeed, use of alcohol and drugs continues to emerge as a strategy for most young people to cope with their prevailing problems such as unemployment, neglect, violence, sexual abuse and poor academic performance [5].

Drug addiction affect people at all levels of development, they are also introduced at very early age, between 10-14 years [6]. Drug abuse has a negative impact on the education of secondary school students. The overall health of the abuser is affected.

Newly discovered substance such as Morphine, Laudanum, Cocaine, were completely unregulated and prescribed freely by physicians for a wide variety of medical problems [5]. During American civil war, Morphine was used freely and wounded veterans returned home with their Morphine. By the early 1900, there were around 250,000 addicts in the USA [5]. Alcohols addiction becomes one of the most wide spread and serious public health problems in the world both developing and developed countries [4]. The use of alcohol and other psycho-active substance has long been linked with risky sexual behavior. A recent study of young people in Scotland shows that above half of both female and male have consumed alcohols before their first experience of sexual intercourse and these who take alcohol were less likely to have used condom [5,7,8].

In Ethiopia, reports of young people's lives disturbed by alcohol and drugs are rampant [9]. The youth including students are especially vulnerable by peer pressure, media influence, poor guidance and role modeling [10]. The problem has taken root in community and learning institution leading to the high number of school drop outs and

idleness. If the problem is left unaddressed, the country risks losing generations as well as remaining under-developed owing to the diversion of resources to address among others basic needs for uneducated and unskilled youth. A lot of research related to drug and substance abuse among students in Ethiopia has been done in community, secondary schools and higher institutions [11].

It is important to note that all drugs are dangerous and that the deliberate ingestion of drugs is wrong and harmful to the individual, the family, the community and society as a whole. Although no consensus exists about the specific root causes of drug abuse and addiction for particular individuals, the reasons why people turn to narcotics, as well as the factors associated with drug and substance abuse are many and varied and include individual predispositions, family characteristics as well as complex social and environmental determinants [12].

The problem of drug addiction now becomes a major problem in Ethiopia. This addiction tradition is often associated with the over growth of night clubs, bars and multiple sexual partnerships in Ethiopia [13-15]. The problem of drug addiction is remaining the same in Nazareth town. The substance abusers include alcohol, chat, cigarette and other. As seen in many developing countries, substance misuse is becoming a growing problem in Ethiopia. Moreover, Students, staff at institutions of higher education and youths in the community are considerably at high risk of substance use. A study done on cigarette smoking and khat chewing among college students in North West Ethiopia revealed 13.1% life time prevalence rate of cigarette smoking and 26.7% life time prevalence rate of khat chewing. In this study, prevalence of cigarette smoking was found to be 8.1 % and that of khat chewing 17.5%. Forty six (31.7%) of the life time smokers and 45.6 % of the life time chewers started smoking and chewing while they were senior secondary school students [11,12,14].

This study is important to know the magnitude of youths' drug addiction, factors that cause for drug addiction of youth in Nazareth town and the finding of the study used as a source of information for the policy makers to prevent expansion of drug addiction and as a base line for other researchers. The overall aim of this study was to assess drug addiction and its associated factor among youths in Nazareth, Ethiopia.

Methods and Materials

Study area and period

The study was conducted in Nazareth town in the south east shoa, which is 99 km far from Addis Ababa capital city of Ethiopia. The study was conducted from September 10, 2016 to September 30, 2016.

Study design

Community based cross sectional study design was employed to conduct this study.

Source population

The source populations for this study were all youth population of Nazareth Town, Age between 15-24 year old.

Study population

The study populations for this study were all youth in the selected kebele of Nazareth Town, age between 15-24 year old.

Inclusion and exclusion criteria

All youth age between 15-24 year old in the selected kebelles are included in the study and youths who are mentally ill and critically sick are excluded from the study.

Study participants and sampling techniques

The required sample size for the study has determined by using single population proportion formula with the following assumption, estimate prevalence P of /0.5/, 95% confidence interval and 5% non-response rate gives the final sample size of 406. Systematic samples of 406 respondents from the youth of Nazareth town were taken for this study. Open ended question and structured interview were used to collect necessary information like Age, sex Educational level, Religion, Marital status, Peer pressure, Economic Level, Life style, type of drug addiction etc. Five diploma holder nurses were participated to collect the data. Finally the collected data were entered to EPINFO 7.1.0 and transferred to SPSS version 23 for the analysis.

Data processing and analysis

The collected data was checked manually for completion then the data was edited, coded, cleaned, stored for consistency and entered in to EPI data version 3.1. Software afterward it was exported to statistical package for social sciences (SPSS) version 23 software for analysis. Descriptive statistics was used to organize and summarize back ground variables like age, sex and other in a clear and concise way. The association between variables was measured and tested using bivariate logistic regression considering p -value less than 0.2 as having significant association and then multi-variate logistic regression was done in this case p -value <0.05 was considered as significant in all cases.

Operational definition

Drug addiction: is a condition which characterized by an overwhelming desire to continue taking a drug through which one has become habituated for repeated consumption [3].

Peer pressure: It is influencing an individual voluntarily or involuntarily.

Drug abuse: It is the chronic use of a drug for a reason other than for which it was intended.

Ethical consideration

Before starting the data collection process, official letters were given to administrative offices of Nazareth Town. The informed consent was obtained from the study participants. The purposes and confidentiality of the study were also informed to the study participants.

Limitation of the study

Since this study uses a cross-sectional study design it does not show the long term effect of drug addiction. The study may not be generalized for other cities in Ethiopia because of different religion and culture of the society.

Results

From the total respondents 283 (70%) explained that they are addicted for one or more than one substance. From the total addicted respondents 93 (23%) are females. The age distribution of drug addiction is almost similar with 205 (51%) among youths age 15 to 20 and 201 (49%) among youths age 21 to 24 years old. Most of the addicted are single (not married) 258 (63.5%).

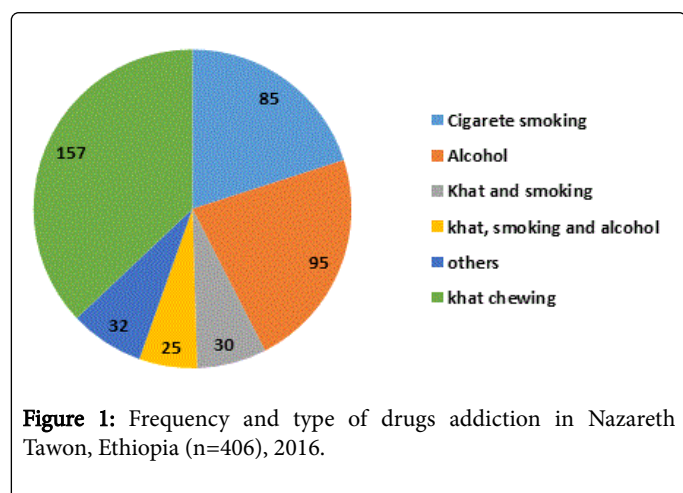


Figure 1: Frequency and type of drugs addiction in Nazareth Tawon, Ethiopia (n=406), 2016.

As the above figure shows khat is the drug which takes frequently 157 (39%) followed by alcohol 95 (23.4%) and cigarette smoking 85 (21%). Thirty two (8%) youths are addicted for khat, cigarette smoking and alcohol (Figure 1).

Most of the respondents 161 (39.6%) start the addiction because of angered or hopelessness followed by recreational activity 110 (27%) and peer pressure 81 (19.9%) (Figure 2).

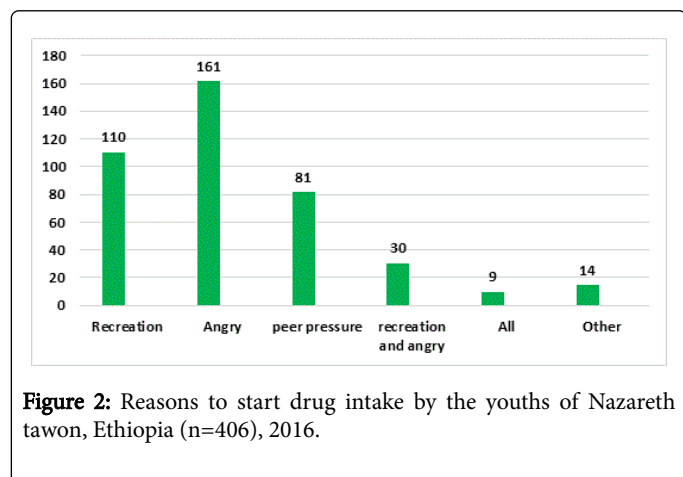


Figure 2: Reasons to start drug intake by the youths of Nazareth tawon, Ethiopia (n=406), 2016.

Discussion

This study tries to assess the prevalence and associated factors of drug abuse among youths in Nazareth tawon and the overall prevalence of "ever used drug" for at least one drug is 70%. The most commonly used drugs in descending order are: khat 157 (39%) followed by alcohol 95 (23.4%) and cigarette smoking 85 (21%). Thirty two (8%) youths are addicted for khat, cigarette smoking and alcohol. This is similar to the study on four Kenyan universities which was 69.8% (1) and Nigerian high school students [3]. In this study the

current prevalence of khat chewing was found to be 39%, which is much higher with study done in North West Ethiopia, 17.5% (11) and Jimma University staffs which was 30.8% [14,16] (Table 1).

Variable	Number (%)
Age	
15-20 years	205 (50.4)
21-24 years	201 (49.4)
Sex	
Female	94 (23.1)
Male	312 (76.7)
Marital status	
Married	128 (31.4)
Single	258 (63.4)
Divorced	20 (4.9)
Religion	
Orthodox	217 (53.3)
Catholic	96 (23.6)
Muslim	69 (17.0)
Protestant	11 (2.7)
Ethnicity	
Oromo	194 (47.7)
Amhara	148 (36.4)
Tigre	30 (7.4)
Others	34 (8.4)

Table 1: Socio demographic characteristics of respondents on assessment of drug addiction and associated factors in Nazareth tawon (n=406), 2016, Ethiopia.

The reasons given by the study participants for chewing khat were due to peer pressure, to increase work performance, to get personal pleasure and to stay awake. This is in line with other researches done in Jima, Gondar and Butajira [9-12].

The lifetime prevalence of khat chewing was 30.3%. This result is slightly lower than the result of study done on Jimma [15], but higher than in North West Ethiopia [11] and Jazan district of Saudi Arabia [4].

Findings show that drug addiction decreases the educational, cultural, moral and family values. The youths who take drugs most of them are young and due to taking regular drugs, they lose their productivity. This study shows that addicted youths had pleasure after they take and only few participants had sadness after they take the substance. Most of the addicted assume that the responsible body for the prevention of drug addiction is the government and only few participants believe that the responsible body for prevention of use of substance (Table 2).

Variable	Drug addiction		COR (95% CI)	AOR (95% CI)
	Yes	No		
Age				
15-20 years	143	62	1.155 (0.662-1.985)	0.361 (0.123-1.060)
21-24 years	62	61		
Sex				
Female	47	47	1.380 (0.600-3.450)*	-
Male	236	76	1.780 (0.923-3.435)	
Marital status				
Married	74	54	0.761 (0.650-0.890)	0.887 (0.276-2.852)*
Single	193	65	2.332 (0.090-0.456)	
Divorced	16	4	2.131 (0.230-0.890)	
Religion				
Orthodox	146	71	0.053 (0.007-0.379)	0.03 (0.004-0.579)*
Catholic	82	14	0.011 (0.001-0.094)	0.081 (0.006-0.034)
Muslim	51	18	0.203 (0.030-1.349)	0.603 (0.050-1.249)
Protestant	4	7	-	-
Ethnicity				
Oromo	153	41	0.116 (0.045-0.296)	0.16 (0.05-0.96)*
Amhara	96	52	0.853 (0.350-2.079)	0.83 (0.50-2.79)*
Tigre	19	11	1.638 (0.456-5.890)	1.38 (0.56-5.90)
Others	15	19	-	-
Status of Addiction				
Yes	282 (69.3%)	-	-	-
No	123 (30.2%)			
Type of addiction				
Chat	157 (38.4)	0.906 (1.480-4.582)	0.626 (1.280-3.582)*	-
Cigarette	85 (20.9%)	2.604 (0.105-9.041)	1.604 (0.105-9.041)*	
Alcohol	95 (23.3)	0.977 (8.946-83.578)	0.277 (5.646-83.77)*	
chat and cigarette	30 (9%)	27.344 (0.535-3.169)	21.384 (0.12-2.149)	
chat cigarette and alcohol	25 (7.9%)	1.302 (0.464-1.767)	1.02 (0.44-1.17)	
Others	32 (7.9%)	-	-	
Reasons of drug addiction				
Recreation	110 (27%)	1.019 (0.595-1.746)	1.019 (0.595-1.746)*	-
Angry	161 (39.6%)	2.486 (1.362-4.5390)	2.486 (1.362-4.530)*	
Peer pressure	81 (19.9%)	0.392 (0.126-1.216)	0.392 (0.126-1.216)	

Recreation and angry	30 (7.4%)	0	-	
Other	9 (3.4%)	-	-	
Feeling after drug addiction				
Pleasure	192 (47.2%)			
Sadness	85 (21%)	-	-	-
confused feeling	122 (30%)			
Who is responsible to stop drug addiction				
Family	140 (34.4%)			
Government	95 (23.3%)			
Society	85 (20.9%)			
Users	74 (18.2%)			
Family and government	1 (0.2%)			
Family, government and society	11 (2.7%)			

Table 2: Predictors of drug addiction in Nazareth town, Ethiopia 2016, n=406, COR: Crude Odds Ratio, CI: Confidence Interval, * significant at p value less than 0.05.

Conclusion

In this study most of the youths are addicted for more than one drug. The most common drugs in this area are khat, alcohol and cigarette. The cause of drug addiction of youths in this study is enjoyment purpose, unemployment, failure in academic achievement, family disagreement, hopelessness, peer pressure. Seventy percent (70%) have positive attitude toward drug addiction, 65.38% do not know about the consequence of drug addiction, 25% suffered from drug addiction related health problem, 30% had economic problem and 45% had social problem due to their drug dependence.

Based on the findings of the study the following recommendations are made:

The town administrator should inform the youths, about the health and socioeconomic problems associated with substance use.

Interventional activities to bring about behavioral changes among youths on the danger of use of Khat, alcohol and other drugs are recommended.

Further study needs to be conducted to explore in to the association between substance use and HIV infection among different groups in Ethiopia.

Competing Interest

The author(s) declare that they have no competing interests.

Acknowledgement

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