**Substance Use Risk Behaviours Among Secondary School Teachers in Enugu Education Zone, Enugu State, Nigeria.**

***Abstract***

*The increasing prevalent of lifestyle related diseases has attracted both local and international concern, that behavior modifications against diseases have become imperative, especially in a workplace such as school. Behaviours perceived as being risk factors for certain diseases can be very challenging to the positive alteration of negative lifestyles. It is in consideration of the enormity of this development to public health and productivity that the researcher was motivated to assess the frequency of substance use risk behaviours of secondary school teachers in Enugu education zone. The survey design was adopted for the study that involved a sample of 155 teachers drawn from a population of 1552 secondary school teachers in the zone, using the proportionate stratified random sampling technique. Instrument for data collection was a 7-item questionnaire known as Substance Use Risk Behaviour Questionnaire (SURBQ) adopted from the Youth Risk Behaviour Survey(YRBSS). The instrument comprised of two sections, A and B. Section A elicited information on the personal data of the respondent, while Section B comprised of 10 items with four response options. Data collection was done by the researcher with the help of two research assistants. All the copies of the questionnaire distributed were duly completed and qualified for data analysis. Data were analyzed using mean, and standard deviation, while the t-test statistic was employed to verify the influence of gender on the teachers’ involvement in substance use risk behaviours at .05 level of significance. It was found that the teachers rarely (x=1.87) indulge in certain substance use risk behaviours such as use of self prescribed drugs and that gender has no significant influence on their substance use risk behaviours* ( t-cal of 0.018 < t-crit of 1.960) p > .05. *Implications of the findings for healthy living and sustainable development were articulated. Subsequently, it was recommended that a workplace health promotion for teachers be adopted to encourage the teachers change their risk behaviours for improved productivity and sustainable development.*

**Key *Words:*** *Assessment, Substance use, Risk Behaviours, Teachers*

**Introduction**

Lifestyle related diseases have been known to be in the increase. This increase has attracted both local and international attention. The attention has become necessary because of the contributions of lifestyle related diseases to leading causes of death. It is in recognition of this attention that the General Assembly of the United Nations held a high level meeting on non-communicable diseases (NCDs) in September 2011 at New York. It was evident in the meeting that several nations had raised alarm over the increasing prevalence of lifestyle related diseases in their countries.

Lifestyle related diseases are preventable through adoption of healthy behaviours. The relationship between health and behaviour made Ademuwagun, Ajala, Oke, Mornkola and Jegede (2000) observe that one’s actions affected his or her health. Unfortunately, modifications of behaviours for a desirable and healthy lifestyle appear to be among major challenges of public health especially among workers. This is why Akinsola (2006) observed that in Sub-Saharan African countries, one of the challenges facing individuals was how to adopt a healthy lifestyle. Such healthy life styles included freedom from substance abuse.

Responsible use of substances has become a neglected dimension of peoples’ lifestyle. This means that individuals have been involved in substance use risk behaviours. Nnabueze (2010) established that human beings had deviated from the original desirable purpose of substance use to purposes that are hazardous to health. Substance use risk behaviours such illicit drug use, smoking and self medication have been known to be a widespread habit which people indulge in without realizing that they are injuries to both their health and welfare of the society, Okafor (2009) lamented that the result of any kind of lifestyle chosen by an individual affects both members of the immediate family and the society as a whole. This is why a study to assess the substance use risk behaviours of individuals especially secondary school teachers will be a welcome development.

Substance use risk behaviours are actions perceived as potentially harmful to the complete wellbeing of an individual in the use of drugs, medication and tobacco. While Nnabueze (2010) noted that consumption of hard drugs had risen in the last decades, Harup (1984) maintained that, increased involvement of people in the abuse of various substances such as tobacco, caffeine and diazepam as well as stimulants and other depressants could result in addictive dependency that created problem for them. Similarly, Samuel (2006) held that drug abuse could take any one of a number of forms, from use of illegal drugs to overuse of vitamin pills to misuse of drugs to control or cure for ailments. Illicit drug use entails abuse of substances such as marijuana, hard drugs, and even prescription misuse and self medication (Samuel 2006; Schwartz 2010). Secondary school teachers in Enugu education zone of Enugu State, Nigeria could be involved in the hazardous use of these substances, hence the need to assess their behaviour in this direction. These teachers are expected to be vanguard of health promotion.

Assessment in the view of Okoro (2000) is an evaluation process that makes use of collected data for estimating the work, quality or effectiveness of an individual or a programme. In this study, assessment means the process of determining the level of involvement of secondary school teachers in Enugu education zone of Enugu State, Nigeria in substance use risk behaviours. Enugu education zone is one of the six education zones under the Enugu State Post Primary Schools Management Board. It comprises of three local government areas of Enugu North, Enugu East and Isi-Uzo. There are 1552 teachers in the 26 secondary schools in the zone. Enugu State is one of the 36 states of Nigeria, and is located at the South East geo-political zone of the country. The geo-political zone has no cultural sanctions for consumption of substances such as tobacco. Furthermore, patent medicine vendors and stores abound and are easily accessible.

Substance use risk behaviours such as smoking are known to be prevalent among adults with its attendant health consequences. Ene (2004) regretted that smoking was becoming a major health problem in Nigeria, and that in spite of repeated government warnings, many Nigerians still smoke. It then follows, that many deaths in Nigeria could be attributed to smoking. According to Benowitz (2004) an estimated 430,000 deaths a year were a consequence of tobacco smoking in USA. It was also reported that about 25 percent of adults smoke cigarettes, with the habit being more prevalent in men than women. Reports (Cancer Facts & Gigures, 1996; American, Lung Cancer Association, 2001) revealed that cigarette smoking constituted the death list health behaviour in both developed and developing countries of the world. It also has enormous implications for workplaces such as school. Implications of smoking ranges from excess health insurance cost, workers’ compensation claims, absenteeism, reduced productivity to serious health consequences on both smokers and passive smokers alike (Leisitikov, 2000; Brownson, 2002).

It is against the background of the enormity of substance use risk behaviours to public health and productivity that the researcher was motivated to conduct the study. The purpose of the study is to assess the frequency of the substance use risk behaviours of secondary school teachers in Enugu education zone. To achieve this purpose, two research questions and one null hypothesis were raised thus:

1. What is the frequency of substance use risk behaviours of secondary school teachers in Enugu education zone?
2. What is the influence of gender on the frequency of substance use risk behaviours of secondary school teachers in Enugu education zone?

**Ho1:** There is no significant difference between male and female secondary school teachers in the frequency of their substance use risk behaviours.

 **Methods**

The study is part of a larger research project on socio-demographic factors as predictors of health risk behaviour of secondary school teachers in Enugu State, Nigeria. Descriptive survey design was adopted for the study. The design has been successfully utilized in a related study on lifestyle indicators. The present study was carried out in Enugu education zone of Enugu State, Nigeria.

***Instrument***

Instrument for data collection was a 7-item questionnaire known as Substance Use Risk

Behaviour Questionnaire (SURBQ) adopted from the Youth Risk Behaviour Survey (YRBS) Questionnaire of Centre for Disease Preventing & Control, USA. The instrument comprised of two sections A and B. Section A elicited information on personal data such as gender, while section B comprised of 6 items with four option responses of *0 days/times; 1-3days/times; 4-6days/times’ 7days/times and above*.

***Sampling and Data Collection***

The population for the study was 1552 teachers comprising of 648 males and 904 females. A sample of 155 teachers representing 10 percent of the population, comprising of 64 males and 91 females was drawn using the proportionate stratified random sampling technique

 The instrument was administered on the teachers in their various schools. Ethical permission was obtained from the Zonal Education Board to allow entry and reception in the sample schools. All the copies of the questionnaire distributed to the teachers were duly completed and qualified for data analysis.

***Data Analysis***

Data collected were entered into the computer and analysed using the SPSS Statistical software (version 16.0). Mean statistic was used to determine the frequency of substance use risk behaviours while the t-test statistic was used to compare the frequency of substance risk behaviours according to male and female. The response options of *0 days/times; 1-3days/times; 4-6days/times’ 7days/times and above*; was assigned nominal values of 1, 2, 3 and 4 respectively. Limit of real numbers was adopted to take decision for the purpose of determining the frequency of the risk behaviours. Consequently, mean responses of 3.50 to 4.00 were interpreted as *Always;* 2.50 to 3.49 as *Often;* 1.50 to 2.49 as *Rarely* and 1.00 to1.49 as *Never.* The t-test statistic was employed to determine the influence of gender on the frequency of involvement in the risk behaviours at .05 level of significance.

**Results**

Results revealed that the teachers were never involved in daily smoking of sticks of cigarettes (x=1.06), taking of snuff (x=1.05), daily and lifetime use of marijuana (x=1.05).However, results indicated that the teachers were rarely involved in the use of self or non-professional prescribed medication (x=1.87). The implication is that the teachers indulge in substance risk behaviours. It is also indicative from the results that both male (x=1.23) and female(x=1.16) teachers were not involved in daily cigarette smoking, daily and lifetime use of marijuana, daily taking of snuff, but indulge in the use of self or non-professional prescribed medication. The results further show that there is no significant difference between male and female teachers in their substance use risk behaviours ( t-cal of 0.018 < t-critical of 1.960) at .05 level of significance.

 **Discussion**

The purpose of the study was to determine the substance use risk behaviours of secondary school teachers in Enugu education zone. The finding of the study reveal that secondary school teachers were never involved in substance use risk behaviours, such as daily smoking of cigarettes and marijuana. It was also found out that the teachers were involved on the use of drugs prescribed by self or non-professionals.

The finding that the teachers never smoked cigarette or marijuana did not come as a surprise to the researcher. This is because, smoking is more of a public habit and the teachers would not want to misrepresent themselves before the students and the society who reserve a lot of respect for them, in addition to their knowledge of the harmful effects to health. Against this background, Rosenstock’s (1974) and Becker’s (1974) health belief model theory make a lot of sense with regard to the teachers smoking and marijuana use. This implies that the teachers considered smoking and marijuana use harmful. Similarly, the society recognizes the teachers as models to be emulated for good conduct. This recognition instills great consciousness on the teachers regarding their conduct in the society. Furthermore, the theory of planned behavior states that beliefs about other people’s approval or disapproval of our behaviours determine our actions ( Ajzen and Fishbean, 1980). On the other hand, the teachers have been exonerated from an earlier finding by Nnabueze (2010) that cigarette smoking was a widespread habit among Nigerian civil servants.

However, the finding that the teachers indulge in use of self prescribed drugs rarely was not surprising to the researcher. This is because reasons why people indulged in self medication are prevalent in Nigeria. Such reasons as earlier established by previous studies (Adawale, 1996; Salami, 1997; Ezedum, 2004) among others include; poverty, proliferation of portent medicine dealers, lack of health care facilities, access to over the counter drugs; proximity to source and availability of the drugs. Furthermore, Enebechi and Ejike (2010) observed that a good number of people did not consult the physician when they fell sick, instead resorted to self medication and patent medicine dealers for cure. This is a dangerous development.

The finding that substance use risk behaviours of the teachers were not dependent on gender was surprising to the researcher. One had expected a significant difference to exist between male and female teachers in the use of marijuana and cigarette smoking. Culturally, smoking by a woman is sternly frowned at in Nigeria. Consequently, cigarette smoking and marijuana use are expected to be more among the male than female. Furthermore, Benowitz (2004) reported that 25 percent of adults smoke cigarettes with the habit being more prevalent in men than women.

**Implications for Healthy People & Healthy Environment**

The finding that the teachers indulged in the use of self-prescribed drugs rarely is deleterious to the teachers’ health and productivity. This is because, self medication as indicated in the use of self prescribed drugs has been implicated for causing certain organ damage and adverse systemic changes in the human body, in addition to psychiatric disturbances. This could promote absenteeism due to ill health among the teachers, thereby reducing productivity. High rate of absence from duty due to ill health had been reported by Hobson (2001) among the teaching staff in England.

Furthermore, psychiatric conditions due to drug abuse and misuse constitute disturbance to both the individual and the society. This is why the issue of substance use risk behaviours should be addressed with determined vigour to control it. It has to be recalled that Okafor (2009) had lamented that the result of any life style affected both members of the family and society. This is a regrettable development when one realizes that consequences of the habit are not limited. For an instance, a mentally challenged individual constitute a social threat. A social threat is a cog in the wheel of driving and achieving the *sustainable development goal (SDGs)* target of achieving peace. The implication is that substance use risk behaviours constitute threats to peoples’ health, healthy environment and development.

**Conclusion and Recommendations**

Teachers’ involvement in use of self prescribed drugs constitutes health risk because of its contribution to leading causes of disability and death. The development is counterproductive to the drive for healthy living and sustainable healthy environment.

 It is the recommendation of the researcher that a workplace health promotion for teachers be adopted to encourage the teachers change their risk behaviours for improved health, productivity and sustainable development.

 ***Acknowledgments***

The researcher acknowledges the assistance of teachers and Principals of the sample schools for their participation and permission. Appreciation is also extended to Prof. Chuks E Ezedum of the University of Nigeria, Nsukka, for his guidance and advice.

**References**

Ademunagun, Z.A; Ajala, J.A.; Oke, E.A.; Moronkola, O.A. & Jegede, A.S.

(2000). *Health education and health promotion*. Ibadan. Royal People Nig Ltd.

Adewole, A. (1996, March 11). Patient heal thyself, *Tell, 11, 32-33*

Ajezen, L. & Fishbein, M. (1980). *Understanding attitudes and predicting*

 *social behaviours*, New Jerssey: Prentice Hall Inc.

Akinsola, H.A. (2006). *A-Z of community health in medical, nursing and*

 *health education practice*. Ibadan: College Press Pub Ltd.

Becker, H. (1974). *The health belief model and personal behavior*. Health

 education monograph. 2, 324-401.

Benowitz, N.L. (2004). Smoking and occupational health. In Joseph Ladou

(ed). *Current occupational & environmental medicine*. New York: Large Med. Books.

Brownson, R.C. (2002). Effects of smoking restrictions in the workplace. *Annual Review of Public Health (23), 333.*

*Ene,* O.C. (2004). *Health wellness & longevity*, Enugu: Cheston Agency.

Enebechi, J.C. & Ejike, F.C. (2010). Demographic variations of self

medication among secondary school teachers in Udi education zone, Enugu State. *ESUT Jorunal of Education. 5(1), 117-184*.

Ezedum, E.C. (2004). Self medication among typical Nigerian in-school rural

adolescent. *Nigerian Journal of Health Education (NJHE), 12(1), 28-36.*

Harrup, T. (1984). Substance dependency. In M. P. P’Donell & T. H. Ainisworth (Eds.). *Health*

 *promotion in the workplace*.;New York. John Wiley & Sons.

Hobson, J. (2001). Learning from teachers. *Journal of Occupational*

 *Medicine*. 51(5), 297-298.

Leisitkov, B.N. (2000). Smoking as a risk factor for accidental death. A meta-

 analysis of cohort studies. *Accident and Prevention (32), 397*.

Nnabueze, U.E. (2010). *Health series, Drug, alcohol and..* Cape Coast:

 University Printing Press.

Okafor, R.U. (2009). 4-circle base Triangular model in ageing and health

**Table 1. Mean Responses of the Teachers on Frequency of Substance Use Risk Behaviours. (**n=155)

|  |  |  |  |
| --- | --- | --- | --- |
| **S/N** | **Item Statement** | **X** | **Decision** |
| 2. | Teachers’ daily smoking of sticks of cigarette  | 1.06 | Never  |
| 3. | Teachers’ daily taking of 2 sticks of cigarette in a row | 1.06 | Never  |
| 4. | Teachers’ daily use of snuff | 1.05 | Never  |
| 5. | Teachers’ lifetime marijuana use | 1.07 | Never  |
| 6. | Teachers’ daily use of marijuana | 1.03 | Never  |
| 7. | Frequency of teachers’ use of self/non professionals prescribed drugs. | 1.87 | Rarely  |
|  | **Grand Mean** | **1.19** | **Never**  |

**Table 2. Mean Responses of the Teachers on Frequency of Substance Use Risk Behaviours According to Gender.(** Male = 64, Female = 91**)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S/No** | **Item Statement** | **Gender** | **X** | **SD** | **Decision** |
| 2. | Teachers’ daily smoking of sticks of cigarette. | **M****F**  | 1.041.02 | 0.560.59  | Never  |
| 3. | Teachers’ daily taking of 2 sticks of cigarette in a row | **M****F** | 1.081.04 | 0.880.80 | Never Never  |
| 4. | Teachers’ daily use of snuff  | **M****F** | 1.131.02 | 0.670.59 | Never Never  |
| 5. | Teachers’ lifestyle marijuana use | **M****F**  | 1.121.01 | 0.660.67 | Never Never  |
| 6. | Teachers’ daily use of marijuana  | **M****F**  | 1.091.00 | 0.550.53 | Never Never  |
| 7. | Frequency of teachers use of self/non professionals prescribed drugs | **M****F** | 1.931.89 | 0.870.81 | Rarely Rarely  |
|  | **Grand Mean** | **M** **F**  | **1.23****1.16** | **0.69****0.66** | **Never** **Never**  |

**Table 3. t-test Statistic verifying the influence of gender on substance use risk behaviours of the teachers.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Gender** | **n** | **x** | **SD** | **df** | **t-cal** | **t-crit** | **p** | **Decision** |
| Male Female  | 6491 | 1.231.16 | 0.690.66 | 153 | 0.018 | 1.960 | .05 | Accept  |

**Substance Use Risk Behaviours Among Secondary School Teachers in Enugu Education Zone, Enugu State, Nigeria.**

***Abstract***

*The increasing prevalent of lifestyle related diseases has attracted both local and international concern, that behavior modifications against diseases have become imperative, especially in a workplace such as school. Behaviours perceived as being risk factors for certain diseases can be very challenging to the positive alteration of negative lifestyles. It is in consideration of the enormity of this development to public health and productivity that the researcher was motivated to assess the frequency of substance use risk behaviours of secondary school teachers in Enugu education zone. The survey design was adopted for the study that involved a sample of 155 teachers drawn from a population of 1552 secondary school teachers in the zone, using the proportionate stratified random sampling technique. Instrument for data collection was a 7-item questionnaire known as Substance Use Risk Behaviour Questionnaire (SURBQ) adopted from the Youth Risk Behaviour Survey(YRBSS). The instrument comprised of two sections, A and B. Section A elicited information on the personal data of the respondent, while Section B comprised of 10 items with four response options. Data collection was done by the researcher with the help of two research assistants. All the copies of the questionnaire distributed were duly completed and qualified for data analysis. Data were analyzed using mean, and standard deviation, while the t-test statistic was employed to verify the influence of gender on the teachers’ involvement in substance use risk behaviours at .05 level of significance. It was found that the teachers rarely (x=1.87)indulge in certain substance use risk behaviours such as use of self prescribed drugs. Implications of the findings for healthy living and sustainable development were articulated. Subsequently, it was recommended that a workplace health promotion for teachers be adopted to encourage the teachers change their risk behaviours for improved productivity and sustainable development.*

**Key *Words:*** *Assessment, Substance use, Risk Behaviours, Teachers.*

*Submitted on Tuesday, 27th September, 2016. by*

 **Jude C. Enebechi,** *(Ph.D)*, who is a Lecturer in the Department of Physical & Health Education, Enugu State College of Education (Technical) Enugu, Nigeria.