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The effects of drug abuse on students' academic performance: an overview of some polytechnics, in North-Eastern part of Nigeria

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Abstract
This research work is concerned with the effects of drug abuse on students' academic performance of some selected Nigerian polytechnics. The reason for this is that some students involved in drug abuse, which led to their poor academic performance as reveals in this study. Data was collected through distribution of questionnaires in the study area which include: Federal polytechnic Bali, Bauchi, Mubi, Damaturu, Maiduguri and state polytechnic, Yola. The total population of the study is one hundred and sixty (162) which is found through simple random sampling technique. Questionnaire is used as the principle instrument for data collection. The use of questionnaire is based on the assumption that affords the respondents a great confident in their anonymity in respond of furnishing us with qualitative information on sensitive issues. Simple percentage is used for the analysis of data in the study. Chi-square is use for the analysis of data, the findings indicate that drug abuse has significant effects on students' academic performance in this research. Therefore, some useful recommendation are made such as; have proper rules and regulations that prohibit the use and abuse of drugs in order to avoid cases of continuous decline in academic performance, in respect to the study outcomes.

Keywords: Drug, Drug Abuse, Effects of Drug Abuse, Academic Performance, Performance, Functionalist Perspective

Introduction

The term drug is defined as any element that after absorbed into a living creature might alter one or extra of its physiological characters. The term is usually used in position to a substance taken for both satisfactory initiative and affected elements (Kwamanga, Odhiambo & Amukoye, 2003) [36]. Worldwide and even locally, drug and substance abuse is persistently ever-increasing problem and is recognized as a danger with severe effects on people's health, security, social-economic and cultural wellbeing. In Nigeria, students constantly exposed that there is substantial frequency of drug and substance use; with changing liking rates recruit for both comprehensive and particular drug abuse (Abdulkarim, 2005) [1]. Some of these commonly abused substances include tobacco, Miraa (khat), bhang, alcohol, cocaine, mandrax and heroine (NACADA, 2006).

Drug abuse among Nigerian adolescence has remained a menace to the global sustainable development of the nation. Substance abuse is a serious issue; a global and international issue mostly in developing countries like Nigeria. Drug abuse is likewise a major public health, societal and individual problem and is understood as an annoying issue for economic crises; hence, for Nigeria's poverty status. Although youth are supposed to be the key agent of transformation and development, some of them have been damaged by drug abuse (rendering them unproductive). Drug abuse has become a global fear in Nigeria because of its effect on youth and the nation as a whole. Drug abuse has a harmful impact on the knowledge of undergraduates in different universities across the globe.

The complete health of the user is affected undesirably and conducts connected with drug abuse incline the abuser to crime and transmissible diseases including HIV/AIDS (Center for Disease Control, 2000) [6]. The use of hard drugs by young students in Nigerian tertiary institution has become an embarrassing incidence to parents, schools, government establishments, and the societies at large. The persistent abuse of drugs between this groups of student can cause psycho-social problems in society. One might hope that this terrible practice and its allied problems would not lead to the upbringing of deranged generation of youths. This panic is not speculative because of what transpires to be the recurrent and rampant drug predicaments in many Nigerian educational institutions. Puberty is a period of changeover from childhood to adulthood and this dangerous developmental epoch is marked by numerous physical, psychological and societal changes. Adolescents are a segment of population with time range between 14-25 years. Most students in tertiary institutions in Nigeria stand usually within the adolescent age range of 14-25 years (Olugbenga-Bello; Adebinpe; Abodurin, 2009).

Adolescence is a stage of experimentation, exploration, curiosity and uniqueness search. Part of such journey encompasses some risk-taking, including the abuse and misused of psychoactive substances, which are the drugs that apply their main effects on the brain causing sedation, encouragement or adjustment in mood of an individual. Adolescents are confronted by the enormous task of inaugurating a sense of personality. The new intellectual skills of growing adolescents give them the capability to reflect on who they are and what makes them unique. Identity is made up of two components, self-concept and self-esteem (American Psychological Association, 2002). Self-concept is a set of beliefs nearly oneself, including characteristics, roles, aims, benefits, values, religious and partisan beliefs, whereas self-esteem is how one feels about one's self-concept. All of the developmental changes that youths experience make them to experiment with new conducts. This experimentation marks in risk-taking, which is a normal part of adolescent development (Sue, *et al*, 2009). Engaging in risk-taking behavior helps adolescents to shape their identities, try out their new decision-making skills and gain peer acceptance and respect. Unfortunately, some of the risk that adolescents take may pose a real threat to their health and well-being. These include pregnancy, cigarette smoking, excessive alcohol consumption and drug abuse. Odejide (2000) posited that drug is said to be abused when its use is not pharmacologically necessary especially when used in the face of legal prohibition or when a socially acceptable beverage is used excessively. Sambo, (2008) viewed that chronic use of substances can cause serious and sometimes irreversible damage to adolescent's physical and psychological development.

Educational stakeholders like parents, teachers and the society at large are worried over the prevalence of drug abuse and its effects and consequences on the undergraduates of the polytechnic Bali Taraba State. Drugs are produced for a variety of different reasons including those associated with ensuring a state of wellbeing, curing illness, and sustaining mental and physical stability. Modern medical substances commonly known as 'medicine' (many derived from plants), do not constitute any danger. If properly administered, drugs can assist human beings in many positive ways. The term 'drug' refers to "any substance, when taken into a living organism, limits ill-health", however if drugs are abused, they can become very "destructive to the individual and to society at large". A drug is a chemical modifier of the living tissues that could bring about physiological, sociological and behavioral changes. Drugs, are substances which, when taken, can limit cognition, perception, mood, behavior and overall body function. It can also produce a change in biological functions through its chemical actions (Balogun, 2006) [6]. A drug is used for reasons such as curing or alleviating pain and diagnosing ill-health and is seen as a common process in many communities. Studies by Kypri, Cronin and Wright (2005), and Melchior, Chastang, Goldberg and Fombonne (2008) succumbed that across the countries of the world, drug abuse tends to be proliferating among youngsters between the ages of 18 and 25 (the current age of polytechnics undergraduates). Stated that the chronic use of drugs can cause serious damage, sometimes permanent physical and social damage (either temporarily or for a long period of time). Internal damage could result as well. To this effect, some of these undergraduates, who are still in their growing stage, become ridiculous, socially misfit in school situations and eventually drop out of school. The misapplication of medicine, self-medication and the usage of illegal substances is called Drug Abuse. Some of these substances in the form of medication give aspiration to the user and specific brain stresses becomes the end user (which is known as pleasurable pathways). The user at first may appreciate it and will want to practice the sensation again (Seraphim, 2005). A person who agrees himself/herself to be measured by a psychoactive substance is called a 'drug abuser' (Merck, 2009). A drug addicted brings forth a situation called neurological functions and his/her annoyances, sensitivity, cognizance, and energy stages change and the drugs can take over his/her normal functioning and well-being (King, 2008). The uncaring use of each substance, mostly the ones that have effects on one's consciousness like alcohol, cocaine, codeine, and methamphetamines results in upset and malfunction (Merck, 2009).

Statement of problem

It is evident that drug use and abuse is still a problem in Nigeria secondary and tertiary institutions despite the several actions taken to curb it. Drug abuse risk has strangled youthful populace in both polytechnics students and non-students sinking them to dummies, zombies and slavering figures as well as worsening their lives at the age which they are maximum needed in society (Ngesu, *et al* 2008). Even though the youth have been educated on the risks of the drug abuse, most of the school students have little or no information of how hazardous the evil is (Ngesu *et al* 2008). While students are anticipated to be aware of the effects of drug abuse and constrain themselves to their studies, the tradition still exists. Drug and substance abuse lead to various problems in most polytechnic in north-east Nigeria. Although some researchers have defensive measures recommended, the researchers have not effectively led to the desired results of curbing the menace of drug and substance abuse in Nigerian tertiary institution. This is because apart from the youth facing a lot of trials as individuals, the family and society comprising the school have not come out entirely to initiate approaches of helping the youngsters. There is constantly a conflict of interest on who has the greater hand in helping the youth. It was against this background that this study will

investigate the causes and effects of drug abuse among polytechnic students in the polytechnic community, and suggested realistic measures to effectively limit this menace.

Objectives of the Study

The study is guided by the following objectives: -

1. To make suggestions on how to prevent and control drug abuse in the study area.
2. To showcase the influence of drug abuse on students in the selected polytechnics.
3. To determine the effects of drugs abuse on academic performance of students in some selected polytechnics.

Research questions

In line with the objectives the below research questions are raised:

1. Can drug abuse be prevented and controlled in the study area?
2. How does drug abuse influence students in the selected polytechnics?
3. What are the effects of drug abuse on students' academic performance in some selected polytechnics?

Research Hypotheses

Based on the research questions the below hypotheses are formulated to guide the study:

HO_1: Drug abuse Has no prevention and controlled in the study area

HO_2: Drug abuse has no influence students in the selected polytechnics?

HO_3: Drug abuse has no effects on students' academic performance in some selected polytechnics

Literature Review

Drug and Substance Abuse from a Global Perspective

Drugs are said to be as old as man himself. Use and abuse of drugs has a long history in many cultures and societies particularly in the study area (Musk & De Klerk, 2003). Natural plants like opium, coca and cannabis among others have been in use for many years. Priests in religious ceremonies have used cannabis, healers have used opium for medicinal purposes and the general population has used nicotine and caffeine in socially approved ways. In Colonial America alcohol is not only widely available as a beverage but also serves as value remedy for many medicinal purposes. In case of South America took cocaine which has a central role in their religious and social systems throughout civilization which strained from around AD 1200 to AD 1550 (Wolmer, 1990). Immigrant Mexican laborers introduced marijuana during the 1920s to the South Western United States. During the Vietnam War, a high rate of heroin use by American military personnel occurred due to the almost pure supply of low-priced heroin in Southeast Asia. All alcoholic beverages contain the same active ingredient alcohol or ethanol'. Ethanol's % ranges from low levels around 3% to 4% in beer, 12% to 14% for wines, 45% to 50% for refined spirits such as liquid. The earlier man explored the properties of every plant, fruit, root and enthusiast he would find. The use of these products therefore would be determined by their pharmacological effects due to the experiences that were new and also by a particular group's pattern of living. In one territory a substance might be used as a love portion, in another as a sacred food or drink for religious ceremonies (Kombo, 2005) [44]. By 20th century mass addiction had spread to other countries including the US. Poverty, crime and disorderly public conduct created by excessive use of alcohol led to reform movements for example the American Temperance Society in 1833. Some substance abuse may have been the effect rather than the cause of poverty and oppression. Thomas Szass, a prominent Psychiatrist and critic of many social policies restricting choice contended that drugs served as a convenient victim for the social ills of urban life (Szass, 1987).

The development of medicinal Chemistry results in several synthetic compounds such as barbiturates, benzodiazepines and amphetamines. These were originally proposed for use as therapeutic compounds for restoration of health. Later, the compounds were refined to more potent compounds and faster routes of administration were devised which favor most rapid transport of central nervous system contributing to abuse. The attitude of society and pattern of use of psychoactive substances have changed over time. The global context in the use of drugs indicates the erosion of traditional theoretical boundaries which also affect the beliefs, value systems and perceptions towards use of drugs (Gakuru, 2012) [22]. The issue of drug and substance abuse is a major headache to societies and authorities from the cities of North America, Latin America and Asia (Ngesu *et al*, 2008). Psychoactive substances pose a significant threat to the health, social and economic status of families, communities and nations. The number of drug users especially alcohol are aged between 15 and 29. These die from alcohol-related cases resulting in 9% of all deaths. 15.3 persons have been associated with drug use and injecting drug use reported in 148 countries of which 120 report HIV infection among this population (WHO report, 2012). It is estimated that 10% of the adult population of the US has alcohol abuse or dependence. Morphine constitutes 10% by weight of opium, the samples used by drug abusers can vary from 2.6% to 9.9% (Kalant, 1977) [33]. In Africa, youth and adults, rich and poor, rural and urban people abuse drugs (United Nations Drug Control Program, 1998). They add that drug abuse is more common among men than women but the situation is changing rapidly as substance abuse among women is less visible and more private. It is noted that beer is preferred by younger males but wine is preferred by women, younger drinkers, educated People and those with low illness. Liquor is preferred by males, heavier drinkers, less educated people, middle aged and older people and those who are at a higher risk for major diseases. Over the recent years many African countries including Kenya, have had an upsurge in the production, distribution and consumption of drugs and substances with the youth mostly affected. Many of these countries have become markets for drugs as a result of the activities of organization and individual traffickers who use Africa as a transit points in their trade with the countries in the North (Affinith, 2002).

Causes of Drug Abuse

There are a lot of factors that cause drug abuse among the Nigerian youths.

Peer Group: This is one of the common causes of drug addiction and abuse. It is a form of societal influence on the affected youth. "Peer group is a group of people of the same age or social status" (Hornby, 2000:860). A lot of evil like drug abuse, armed robbery, rape, among our youths in Nigeria and beyond are caused by peer groups. Someone can be influenced to become a drug addict by his friends who are

drug addicts. Some people are drug addicts today because they associate with drug addicts and they do not want to be called "Jew guys" by their friends. Some people are compelled by their friends to become drug addict. One would like to be identified with his friends or peer group and when one is addicted to a particular drug he or she will have the craving for that drug thereby losing the sense of direction in his or her life.

Family: The parental background of a child can expose a child to all sorts of evil including drug abuse. This could be due to family problems like broken homes, polygamous family, poverty, cultural influence on children, having a father who is a drug addict etc. if a child has a father who is a drug addict, it is likely that the child will become a drug addict, "like father like son". As the child watches his father there is every tendency that the child will become a drug addict or smoker and from cigarette smoker he will graduate to other hard drugs. P. O. Eze, (Personal Communication 26th April, 2009). "I was a drug addict before because my father was a drug addict and several times I used to see him snorting drugs into his nostrils, drinking the tablet form and injecting the drug into his body. In an interview with the researcher a girl of 20 years, she said, "I am a drug addict because I cannot behold and bear the enmity between my parents, any time they start their quarrel, I take drug to forget about them". M. I. Ikenwa, (Personal Communication 28th April, 2009). Some parents who engage too much in the struggle for survival tend to neglect their responsibilities on their children.

Emotional Stress: Some youths are emotionally stressed but instead of looking for a proper medical attention they will embark on self-medications, like taking drugs that are not prescribed by a doctor which leads to drug abuse. In this way, they use hard drugs that are illegal and unwholesome for their body to stop the stress. Some youths desire coffee or other hard drugs in order to subdue sleep without knowing that nature cannot be cheated. When one is an addict to a particular drug, the craving for that drug will be high. The habitual use of this substance may lead to drug abuse (Hornby, 2000:860) [28].

Frustration: This is another fast and commonest factor that leads to drug abuse. Many youths are frustrated in our society today. Many of our youths 'desire or dreams are unfulfilled. Some are in the higher institutions without graduating because of references and other hidden things that are setting them back. Frustration can set in based on a number of factors such as graduating from higher institution without getting any employment, being disappointed by their loved ones, death of a dear one or bread winner, dismissal from job, conspiracy and accusation etc. All these contribute to drug addiction and abuse (Personal Communication 28th April, 2009).

Social Effects of Drug Abuse

Apart from the effects of drug abuse on a victim or an addict as already discussed, it also has social and economic effects as thus:

Blood Transmitted Diseases: - The society is at risk because of the menace called drug abuse. Many of the drug addicts are dying of blood transmitted diseases like AIDS because most of them indulge in the exchange of unsterilized injection equipment for injecting of drugs into their bodies. With this, the society is at risk because AIDS can spread in the society through them. They can contact AIDS through coitus because drugs urges for sex and someone can also contact from them. There was an incident that happened at prison in Jalingo from 1999-2000. Therefore, some of the prisoners were sharing injection needles in taking their drugs. When one of them was released due to illness, it was discovered through the medical test carried on him that he was affected with HIV VIRUS (AIDS). He died and all the inmates that used the same injection equipment died of aids. (Dauda, 2006) [16].

Family Problem. Drug abuse is one of the causes of family problem. A lot of families are having problem because of drug abuse. A man who is a drug addict and who drinks to stupor can beat his wife and children to death especially when the children are still tender. Such man cannot take care of his family (Wills and McNamara *et al*. 1996).

Avoidance or prevention Ideologies for drug abuse

These revised avoidance or prevention ideologies have emerged from reviews of some research literature on the origins of drug abuse behaviors and the common elements found in research on effective prevention programs. Parents, educators, and community leaders can use these principles to help guide their thinking, planning, selection, and delivery of drug abuse prevention programs at the community level. The references following each principle are representative of literature (Johnston *et al*. 2002) [32].

Risk Factors and Protective Factors for Drug Abuse

Hawkins *et al*. (2002) [25] assert that prevention programs should enhance protective factors and reduced risk factors. These include the following:

- The risk of becoming a drug abuser involves the relationship among the number and type of risk factors (e.g., deviant attitudes and behaviors) and protective factors (e.g., parental support) (Wills and McNamara *et al*. 1996).
- The potential impact of specific risk and protective factors changes with age. For example, risk factors within the family have greater impact on a younger child, while association with drug-abusing peers may be a more significant risk factor for an adolescent (Gerstein and Green 1993; Kumpfer *et al*. 1998).
- Early intervention with risk factors (e.g., aggressive behavior and poor self-control) often has a greater impact than later intervention by changing a child's life path (trajectory) away from problems and toward positive behaviors (Ialongo *et al*. 2001) [29].

Prevention programs should address all forms of drug abuse, alone or in combination, including the underage use of legal drugs (e.g., tobacco or alcohol); the use of illegal drugs (e.g., marijuana or heroin); and the inappropriate use of legally obtained substances (e.g., inhalants), prescription medications, or over-the-counter drugs (Johnston *et al*. 2002) [32].

Prevention programs should address the type of drug abuse problems in the local community, target modifiable risk factors, and strengthen identified protective factors (Hawkins *et al*. 2002) [25].

Prevention programs should be tailored to address risks specific to population or audience characteristics, such as age, gender, and ethnicity, to improve program effectiveness (Oetting *et al*. 1997).

Theoretical Framework

Structural-Functionalist Theory

Structural Functionalism is a theoretical perspective that

focuses on the functions performed in society by social structures such as institutions, hierarchies, and norms. Within this theory, function refers to the extent to which a given activity promotes or interferes with the maintenance of a system. Functionalism emerged in the early 20th century and is associated with authors such as Emile Durkheim, Talcott Parsons, Herbert Spencer, and Robert Merton, who dominated American social theory in the 1950s and 1960s. Some of these theories in Structural functionalist are as follow:

1. Motivation and change theory

The first part of this chapter has covered theories of motivation related to the acquisition and maintenance of addictive behaviors. We now turn to motivational theories of behavior change. In examining motivation to change, it's fair to say that the "currency" of motivation is not fixed. Although it may seem to people that they make choices as a result of a rational decision-making process, social psychologists find that choice can be readily affected by changing characteristics of the message or messenger. Thus, the currency of motivation depends not only on the product, but also on what other things are for sale, how one perceives the marketplace, and what one thinks of the seller.

Decision Making There is a long history of explaining motivation in terms of decision-making strategies. Benjamin Franklin made difficult decisions by listing his competing motivations in a sort of algebraic equation. After listing the likely pros and cons of an outcome and giving weights to the importance of each item, he added up the two lists and acted accordingly. Thus, Franklin had developed a comparative model of decision making in which it was not the total number of gains or losses but the value of gains and losses in relation to each other that influenced his decisions. During the early stages of addiction, decisions to use a substance are often associated with a weighing of the pros and cons of use, relative to other available options (Herrnstein & Prelec, 1992) [27]. As addiction develops, rational decision making seems to take a back seat to neurobiological processes. However, there is still a clear role for decision making with regard to the pros and cons of committing to treatment. Janis and Mann (1968, 1977) [31] introduced the use of the decisional balance in modern psychology as a means of structuring the decision maker's "vigilant" consideration of the pros and cons of each available alternative. Asserting that attention needed to be given to both the utilitarian and the core value-based gains and losses to the self and to others, Janis and Mann designed an eight-cell table to be used in the examination of each possible decisional choice. If one considers two alternatives, such as continuing to use a drug versus quitting, then the table expands to 16 cells, quite an eyeful of information.

2. The Language of Motivation theory

The use of reactance theory to guide message framing is an example of the importance of language in interpersonal relations. Philosophers, linguists, and social scientists have for many Years studied the role that language plays in an individual's understanding of him- or herself and his or her social world (Chomsky, 1979; Mead, 1934; Sullivan, 1953) [13]. The interplay between language, beliefs, intentions, and actions is particularly important when considering substance abuse counseling, which by in large uses a language-driven approach. Early on, psychology theory emphasized language as a way to gain insight, to discover something about oneself. However, more recent theory has focused on the way that language can change one's internal state rather than simply describe it. Heider (1958) [26] spent the better part of 50 years studying the language of motivation. He began by categorizing language during ordinary interactions. In doing so, Heider observed that humans have an innate capacity to interpret social relations through the lens of linguistically based categories. That is, language not only communicates motivation and intent, but also helps people to understand and predict social interactions (Malle, 2004). Moreover, because people use similar rules for categorizing people as they do for categorizing objects, many of the rules-of-thumb and errors people make in object perception (e.g., optical illusions) also apply to social perception (e.g., making inappropriate attributions about the causes of behavior). According to Heider, intentionality is one of the most important attributions people make: Are an individual's actions intentional or unintentional? If deemed intentional, then the perceiver searches for an internal explanation, such as the beliefs or values of the person (Malle, 2004). On the other hand, if the behavior is deemed unintentional, then the perceiver looks to situational factors, such as external pressure, accidents, or random chance to explain the behavior. Malle and Knobe (1997) found that people judged that a behavior was intentional if the agent (1) desired the outcome, (2) believed that his or her action would lead to the outcome, (3) intended to perform the action, (4) had the skill to perform the action, and (5) was aware that he or she was performing it. The first two factors (belief and desire) reflect intention, while the factors that follow (skill and awareness) reflect intentionality. Thus, intentionality includes desire, awareness, and action. Interestingly, the words we use to describe our own intent can also change behavior. The linguist J. L. Austin (1962) [5] said that language is not just used to describe reality, but can also be used to create reality. In his aptly titled book, How to Do Things with Words, he refutes the view that the primary use of language is to describe reality in terms of being "true" or "false." In fact, he argues that "truth value" utterances actually constitute a very small part of ordinary language. In his most striking example, he describes performative utterances that actually complete an action. For instance, if I say, "I promise to love you" or "I'll bet you a dollar it rains tomorrow," I am not describing something, but rather doing a kind of action with my words

Summary

Philosophers, linguists, and social scientists have for many Years studied the role that language plays in an individual's understanding of him- or herself and his or her social world. Therefore, this study sees the need to adopt language of motivation theory through which the outcome of this work will be useful to the participant and the entire society so long as it will go a long way in circulation. Based on the above reviews and theoretical perspectives, there is need to specifically address the issue of initiation, banditry, Boko haram, insecurity, rape, kidnaping which are also some ruts courses of drug abuse. Kidnapped victims had corroborated the facts that illicit substances were enablers of insecurity currently plaguing the country.

However in today's contemporary society almost both students in secondary and tertiary institution are exposed and had some issues with drugs preference which is likely to be a function of availability, frequency of use in individual's subculture, and affordability. Consequently, this study

realizes the availability, peer pressure, rebelliousness, and family attitude, and possibly anxiety, depression as the major contributors to initiation of drug abuse. On the other hand, this research argues that the antisocial behavior in adolescence is an important predictor in initiation. However, the study indicates the genetically predisposed person would be more rapidly be initiated into alcohol abuse (and by insinuation, other drug abuse) and overtime will switch from use to abuse would occur very rapidly.

Methodology

In this heading, the research method applied for the study is discussed as thus: This entails the selection of a qualitative design and preparation for data collection. Decisions on how the sample is framed and developed this through the entry to a research site which gain, data collection, methods and a protocol for recording information and analysis of data (Denzin & Lincoln, 2000; Taylor & Bogdan, 1998) [18].

Research Design

A qualitative research design is used as a results of its many labelled tradition‟ (Lofland & Lofland, 1984). The most commonly used labels appear to be field research or fieldwork, naturalism, ethnography, interpretive research and constructivist research (De Vos, 1998) [19]. Moreover, qualitative research design is adopted because of the following reasons: The aim of this study is not to explain human behavior in terms of universally valid laws or generalization, but to understand and interpret the meanings and intentions that underline everyday human actions (Mouton, 1986, cited in De Vos, 1998) [19].

Area of the study

The study area covers some polytechnics in North-eastern Nigeria. Specifically, the study takes place in Federal polytechnic Bali, The federal Polytechnic Damaturu, the Federal polytechnic Mubi, Federal Polytechnic Bauchi, Ramat Polytechnic Maiduguri and State Polytechnic Yola.

Population of the Study

The population of the study are students from the polytechnics under study as defined by the objectives of this work and reflect in the research questions. Population could be represented by people, institutions and animal. The total population of the study is nine hundred and seventy two (972). However due time constrain and financial implication, this study uses simple probability random technique in which the participants are reduced to one hundred and sixty eighty two (162). This entails that twenty seven (27) participants are randomly selected from each institution in the study area.

Technique of Data Analyses

The study used simple probability sampling owing to the facts that every participant in the population has equal chance of being included in sampling. More to that, the researcher is able to construct a sample frame fast and used a random number generated. Therefore it has the greatest freedom from bias but represent the most costly sample in terms of time, energy and size. (Zikmund 2002; Brown, 19 47) [48].

Research Instrument

Questionnaire was used as the principle instrument for data collection. The use of questionnaire was based on the assumption that, it affords the respondents a great confident in their anonymity in respond of furnishing us with qualitative information on sensitive issues. However, the questionnaire was administered through trusted contest version to the sample respondent from the population.

The questionnaire was divided into two section. The first was on the personal characteristic such as sex, age, and marital status. The second section was on drug abuse and poor academic performance of students of the selected polytechnics in north east.

Data presentation and data analysis

In this research study, a total number of two hundred and fifty (720) questionnaires were prepared and administered to the respondents in the case study. In the course of the distribution and retrieval of the 720 questionnaires (that represents 100% of the total responses) from the sample respondents, a total number of 308 questionnaires that consisted of 43% of the total responses were returned wrongly filled, while 250 questionnaires that consisted 34% of the total responses were not returned to the researcher, however it was the remaining 162 Copies of questionnaires representing 23% of the respondents responses that were successfully filed and retrieved by the researcher. Therefore, this 162 successfully filled and retrieved questionnaires will be the adequate questionnaires that will be used in this study for the purpose of analysis, generalizations as well as conclusions. However, these questionnaires were distributed to both teaching and non-teaching staff in the case study. Hence the questionnaire distribution and retrieval analysis can be shown in the below table as follows:

Table 1: Response Rates Statistics Table

Details	Number	Percentage%
Copies retrieved and filed	162	23
Copies wrongly filed	308	43
Copies not returned.	250	34
Total Copies Sent Out	**720**	**100**

***Source*:** Field Survey 2023

Test of Hypothesis

In Section one of this study three null hypothesis were formulated to guide the study. These

Hypothesises will now be tested so as to form the basis of either rejecting or not rejecting the null hypothesis from which inferences can be drawn.

The test of the hypothesis in this section shall be done using chi-square technique as stated in in the methodology. However, it is important to note that the test of the hypothesis will be done based on the research questions data generated from the field survey on this study.

Test of Hypothesis One

HO_1: Drug abuse Has no prevention and controlled in the study area

Table 2: Chi-square Observed table values for Hypothesis one

Questions	Strongly Agree	Agree	Undecided	Disagree	Total
A1	19	18	10	3	50
A2	13	17	9	11	50
A3	9	16	15	10	50
A4	11	9	16	14	50
TOTAL	**52**	**60**	**50**	**38**	**200**

***Source*:** Researcher Computation 2023

NOTE: To get expected value: (Column total) Row total
Grand total
SA = 52×50/200 = 13
A = 60×50/200 = 15
UD = 50×50/200 = 12.5
D = 38×50/200 = 9.5

Table 3: Chi –square contingency table for Hypothesis one

	FO	FE	FO – FE	(FO –FE^2)	(FO – FE^2/FE)
Q1	19	13	6	36	2.769
	18	15	3	9	0.6
	10	12.5	-2.5	-6.25	-0.5
	3	9.5	-6.5	-42.25	4.447
Q2	13	13	4.25	18.0625	2.0642
	7	15	- 1.75	3.0625	0.35
	6	12.5	0.25	0.0625	0.0108
	3	9.5	2.75	7.5625	0.0108
Q3	9	13	-2.75	7.5625	0.8642
	16	15	2.25	5.0625	0.5785
	15	12.5	-0.75	0.5625	0.0978
	10	9.5	1.25	1.5625	0.2717
Q4	7	13	-6	-36	-3.789
	9	15	-6	-36	-3.789
	6	12.5	-6.5	-42.25	4.447
	7	9.5	-2.5	-6.25	-0.657
TOTAL				Calculated value	**7.7652**

***Source*:** Researcher Computation 2023

Chi – square critical table value at 4 under 9 using the X^2 Table**= 3.053**

Decision RULE
Since the Chi square-calculated value **(7.7652**) is greater than the chi square-critical table value
(3.053) at an infinite degree of freedom and 0.05 percent level of significance, therefore we reject the Null hypothesis **H0** which state that HO1: Drug abuse Has no prevention and controlled in the study area and accept the Alternative hypothesis **H1** to conclude that HO1: Drug abuse Has prevention and controlled in the study area

Test of Hypothesis two
HO$_2$: Drug abuse has no influence students in the selected polytechnics

Table 4: Chi – Square Observed Value Table for Hypothesis Two

Question	Strongly Agree	Agree	Undecided	Decided	Total
B1	11	15	17	7	50
B2	18	12	4	16	50
B3	17	11	6	16	50
B4	15	13	14	8	50
Grand Total	**61**	**51**	**41**	**47**	**200**

***Source*:** Researcher Computation 2023

NOTE: To get expected value: (Column total) Row total
Grand total
SA = 61×50/200 = 15.25
A = 41×50/200 = 12.75
UD = 41×50/200 = 10.25
D = 47×50/200 = 15.25= 11.25

Table 5: Chi –Square Contingency Table for Hypothesis Two

Q	FO	FE	FO-FE	(FO-FE)^2	(FO-FE)/FE
5	11	15.25	0.75	0.5625	0.0548
	15	12.75	-2.75	7.5625	0.9758
	17	10.25	0.75	0.5625	0.1071
	7	11.25	1.25	1.5625	0.2717
6	18	15.25	-2.25	5.0625	0.4939
	12	12.75	4.25	18.0625	2.3306
	4	10.25	-0.75	1.5625	0.2976
	`16	11.25	-3.25	0.5625	0.00978
7	17	15.25	3.25	10.5625	1.0304
	11	12.75	3.75	10.5625	1.3529
	6	10.25	3.75	14.0625	2.6785
	11	11.25	-0.75	0.5625	0.0978
8	15	15.25	4.75	22.5625	2.2012
	13	12.75	-4.75	22.5625	2.91129
	14	10.25	-0.25	0.0625	0.01190
	8	11.25	0.25	0.0625	0.0108
			Calculated Value		**14.93**

***Source*:** Researcher Computation 2023

Calculated Value= 14.93
Critical table value at 14 under 9 using the X^2 Table value= **7.790**

Decision Rule
Since the Chi square-calculated value (14.93) is greater than the chi square-critical table value
(7.790) at an infinite degree of freedom and 0.05 percent level of significance, therefore we reject the Null hypothesis **H0** which state that " Drug abuse has no influence students in the selected polytechnics." and accept the Alternative hypothesis **H1** to conclude that HO2: Drug abuse has no influence students in the selected polytechnics

Test of Hypothesis Three.
HO$_3$: Drug abuse has no effects on students' academic performance in some selected polytechnics.

Table 6: Chi – Square Observed Value Table for Hypothesis Three

Question	SA	A	UD	D	TOTAL
C1	35	91	40	44	210
C2	150	25	15	20	210
C3	40	55	55	60	210
C4	73	43	57	37	210
Grand Total	**298**	**214**	**167**	**161**	**840**

***Source*:** Researcher Computation May, 2023

Note Expected Values: $\frac{\text{(Column total) Row total}}{\text{Grand total}}$

SA = 298×210/840= 74.5

A = 214×210/840= 53.5

UD = 167×210/840= 41.75

D = 161×210/840= 40.2

Table 7: Chi –Square Contingency Table for Hypothesis Three

Q	FO	FE	FO-FE	$(FO-FE)^2$	$\frac{(FO-FE)^2}{FE}$
9	35	74.5	1.25	1.5625	0.1225
	150	53.5	0.25	0.0625	0.0071
	40	41.75	-0.25	0.0625	0.0147
	73	40.25	-1.25	1.5625	0.4807
10	91	74.5	-2.75	7.5625	0.5931
	25	53.5	3.25	10.5625	1.2071
	55	41.75	-1.25	1.5625	0.3676
	43	40.25	0.75	0.5625	0.1730
11	40	74.5	-1.75	3.0625	0.2401
	15	53.5	-0.75	3.0625	0.0642
	55	41.75	1.75	3.0625	0.7205
	57	40.25	0.75	3.0625	0.1730
12	44	74.5	3.25	10.5625	0 .8284
	20	53.5	-2.75	7.5625	0.8642
	60	41.75	-0.25	0.0625	0.0147
	37	40.25	-0.25	0.0625	0.0192
	Calculated Value				**5.8902**

X^2 Calculated Value= **5.8902**

X^2 Critical Table value at 5, under 08 **= 7.343**

Decision Rule

Since the Chi square-calculated value (5.8902) is less than the chi square-critical table value (7.343) at an infinite degree of freedom and 0.05 percent level of significance, therefore we accept the null hypothesis H0 which state that "Drug abuse has no effects on students' academic performance in some selected polytechnics and reject the alternative hypothesis to conclude "Drug abuse has significant effects on students' academic performance in some selected polytechnics

Discussion of Findings

From the result of the chi-square analysis on the questionnaires discussions and interpretations above, it can be concluded that the basic findings of this study are that:

1. Drug abuse Has prevention and controlled in the study area.
2. Drug abuse has influence on students in the selected polytechnics in North East Nigeria.
3. Drug abuse has significant effects on students' academic performance in some selected polytechnics

However, the above result is in tandem with the result of Alaska M. 2013 And Uthman and Joseph, 2011.

Conclusion and Recommendation

In conclusion, it can be noted that drug abuse has always existed, its consequences have negative impact on student and their communities at large. The literature shows that solutions can' be put in place to solve this problem though it is becoming rampant today.

Therefore, this study concludes based on the findings that:

1. Drug abuse Has prevention and controlled in the study area
2. Drug abuse has influence on students in the selected polytechnics in North East Nigeria.
3. Drug abuse has significant effects on students' academic performance in some selected polytechnics

However, the above conclusion is in tandem with the conclusion of Alaska M. 2013 And Uthman and Joseph, 2011.

Recommendations

Based on the study findings and conclusion drawn above, the study derived the following Recommendations:

1. Parents can use information on risk and protection to help them develop positive preventive actions (e.g. talking about family rules) before problems occur.
2. Educators can strengthen learning and bonding to school by addressing aggressive behaviors and poor concentration—risks associated with later onset of drug abuse and related problems.
3. Community Leaders can assess community risk and protective factors associated with drug problems to best target prevention services.
4. Parents should be more concerned with negative impacts against their children especial when they are out of the school environments.

5. Dangers of drugs and their abuses should be made known to students in order to discourage them from using and abusing them.

Schools' should have proper rules and regulations that prohibit the use and abuse of drugs in order to avoid cases of continuous decline in academic performance.

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