

# DRUG AND SUBSTANCE ABUSE AMONG FEMALES IN SELECTED IDP CAMPS IN THE FEDERAL CAPITAL TERRITORY, ABUJA, NIGERIA

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# **ABSTRACT**

Early experimentation with hard drugs and substances has increased tremendously among young girls and women in Nigeria, especially in Internally Displaced Persons (IDP) camps. The consequence of this is the increase in the likelihood of addiction in these girls and young women which may impede human security. Even though scholarly attention has been paid to substance abuse and its diverse physical and psychological implications, not many studies have been carried out using gender as a point of interrogation and analysis. Society is structured to view men as aggressors and thus, it is common to focus on men in substance abuse discourse than on women. More importantly, is the fact that the travails of displaced females living in camps have always been interrogated from victimhood perspectives with little attention paid to how their experiences are changing gender roles, especially in northern Nigeria. This study is qualitative and employs an explorative research design. It relies on both primary and secondary sources of data. The study was carried out in three (3) selected IDP camps in the Federal Capital Territory in Abuja, Nigeria namely; Area 1, New Kuchingoro and Kuje IDP Camps. Collected data were content-analysed using thematic and narrative styles. The study examines the factors responsible for the increased use of hard drugs by young girls and women in the selected IDP camps, the common types of substance used by them, the implication for human security and the most effective ways of tackling the menace.

Keywords; Substance use, Females, Human Security, Internally Displaced Persons, Abuja Nigeria

## INTRODUCTION

Due to the high prevalence of substance abuse in contemporary Nigeria (Jatau, Sha'aban, Gulma, Shitu, Khalid, Isa, Wada and Mustapha, 2021), it is no surprise that substance-related issues have found their way into the Internally Displaced Persons (IDP) camps across the country (Akuto, 2017). More specifically, is the fact that substance abuse is changing the gender characteristics of northern Nigerian females who were displaced due to insurgency and banditry most especially from the Northeast and North-central regions. The displacement that occurred due to rising violent conflicts, in the forms of terrorism, farmer-herders conflicts and banditry, have led to the loss of lives, destruction of properties and disruption of means of livelihood across the country, especially in the Northeast, Northwest and Northcentral regions (Izuzu and Dele, 2021). Females from these parts of Nigeria were hitherto reputed for their meekness and reservation influenced by culture and religion (Agbaje, 2020). However, due to the trauma faced during the crisis that led to their displacement and the subsequent hardship of hunger, poor infrastructures and poor physical and mental health faced in camps, many of these women are currently taking upon themselves some reversed societal norms associated with human insecurity in terms of crimes, health problems and psycho-social vices. Many of these developments were alien to the traditions of the displaced persons and only surfaced as a result of their experiences of insurgency and eventual displacements. Nevertheless, this is not to say that women from northern Nigeria are not faced with challenges prior to the inception of insurgency in 2009. For example, there is extensive literature on how gender politics in the northern region of Nigeria have been oppressive to women (Zen and Pearson, 2014; Comoli, 2015; UNESCO, 2019). Women and girls have had to bear the heavy burden of sexual abuse, forced marriage and genital mutilation among other vices meted against them. The weaponisation and instrumentalisation of women by Boko Haram insurgents, both as direct targets of attacks and in operational deployments have also been examined (lyi, 2018; Campbell, 2016). It is sufficient to say that many of the extant challenges



have been aggravated by the trauma of displacement among the displaced females in the selected camp. The relatively frequent substance abuse leading to substance-related problems by the IDPs reflects the influence of drug abuse on health issues, psychiatric symptoms, high rates of crime, and unwanted pregnancy among several other consequences.

Substance abuse has been described as a chronic, often relapsing brain disease that causes compulsive drug seeking and use, despite harmful consequences to the drug addict and those around them (Muhammad, 2016). Abusing drugs or any form of the substance is a brain disease because it can lead to changes in the structure and functions of the brain and that will invariably affect the entire functioning of the body's system. According to the United Nations Office on Drugs and Crime (UNODC, 2017; 2019), substance abuse is an emerging global public health issue. In their World Drug Report of 2019, it was estimated that 271 million (5.5%) of the global population (aged between 15 and 64 years), had used drugs in the previous year. Also, it was projected that 35 million persons may be experiencing drug use disorders. In a similar vein, the Global Burden of Disease mentions that there were 585,000 deaths due to drug use, globally in the year 2017 (Jatau, Sha'aban, Gulma, Shitu, Khalid, Isa, Wada, and Mustapha, 2021). Consequently, substance abuse has been linked to organised crime, illicit financial flows, corruption, terrorism and all forms of insurgencies (banditry, farmer-herder conflicts, kidnapping). Thus, drug abuse is a very serious problem demanding the urgent attention of policymakers and other stakeholders in the society and diaspora.

This study is focused on three (3) major IDP camps in the federal capital territory namely; New Kuchingoro, Area One and Kuje. These camps are mostly occupied by displaced persons from Northeast Nigeria and about seventy five percent (75%) of its occupants are women and young girls from Northern Nigeria. These are people forced out of their natural environments and comfort zones and hence are faced with quite a number of psychological and physical problems (Pearson, 2018; Olanrewaju, Olanrewaju, Omotoso, Alabi., Amoo, Loromeke and Ajayi, 2019). A lot of the targeted population for this study is still caught in the trauma of losing their loved ones in the most harrowing circumstances. They are thus traumatised and depressed and require special care and attention (Olufadewa, Adesina, Oladele and Ayorinde, 2022). The travail of females who are abusing substances in the three selected IDP camps is the major focus of this study. The forms of drug and substance abused, factors responsible for the abuse, mode of accessibility, implications for human security and possible ways of addressing the problem and restoring the females to normal life within and outside the camps are the aims of this study.

Even though scholarly attention has been paid to substance abuse and its diverse physical and psychological implications (Yunusa, 2016) and also, has attention been paid to some of the gender dimensions to substance abuse (Adenugba and Okeshola, 2018). Adequate scholarly attention, however, has not been paid to the females in IDP camps. The reason may not be farfetched in the fact that they tend to be overlooked due to their displacement status and hence are often considered from victimhood as well as humanitarian angle. This is not to say that all displaced females are drug abusers but to reflect the extent of the challenge of drug abuse among Nigerians, especially among the displaced population. The picture of an internally displaced person in Nigeria is that of an individual in need of care (food, shelter, medical, sanitary aid, and clothing). Thus, it is very easy to gloss over the possibility of IDP camps becoming a breeding ground for drug addiction and its attendant challenges.

In addition, African society especially Nigeria is structured to view male humans as aggressors and thus, it is common to focus on males in substance abuse discourse than on females (Slack, 2017; Agbaje, 2019). This is more so since young boys and men engage in substance abuse to aid some of the societal expected roles accorded to them such as engaging in sports, manual labour in farms, industry and related fields, sexual performance and courage enhancements. Similarly, the evolving vice of young girls and women engaging in substance abuse in IDP camps has not been given sufficient attention in the literature. Furthermore, the prevalence of substance



abuse in IDP camps in Nigeria, the gender dimension to the vice, physical, psychological, social and economic consequences of abusing drugs, are of great concern in this study. This study is also focused on the array of problems experienced by the females who persistently abuse drugs in IDP camps including mental health-related problems, crimes, prostitution, and poor relationships among others. This study seeks to contribute to scholarship (Johnson, 1996; Ezard, 2012) in this field by focusing solely on the ways drugs and substances are being misused and abused by young girls and women in selected IDP camps in the Federal Capital Territory in Abuja, Nigeria against the backdrop of unveiling the implications on human security.

# **Empirical/Literature Review**

Drugs and substance abuse has been established as serious public health problem that affects almost every society in the contemporary world (Stanford, 2014). It has been mentioned as a source of several serious illnesses or injuries among people. Some of the negative roles played by drugs and substance abuse include violence, auto crash, stress, impaired judgements, disability, miscarriage in pregnancy, madness suicide, child abuse and deaths. It has the capacity of destroying social values that serve as frameworks upon which a society is built (Alegria, Hasin, Nunes, Liu, Davies, Grant and Blanco, 2010). Substance abuse can lead to addiction. Addiction, according to scholars has been characterised as the inability to consistently abstain from the substance used (Baler and Volkow, 2006). It is expressed through behaviours such as craving, lack of control, behavioural impairment, heightened or reduced physical and emotional feelings, feeling of compulsion in expression, and diminished judgement in intrapersonal and interpersonal relationships among several other difficulties and discomfort in all spheres of life. The effects of substance abuse on the abusers depend on several factors hence the reason for variations in effects. For instance, a drug may have an exciting effect on one user while having depressing effects on the other. Thus, addiction, like other chronic diseases, is progressive and often involves cycles of relapse and remission (Volkow, Wang, Fowler, Tomasi, Telang and Baler, 2010).

Even though over time, men have been identified as the majority of substance abusers globally, the gap has decreased in recent times (Grucza, Norberg and Bucholz, 2008) as more women are prone to substance abuse. These gender differences in substance-use disorders have emerged in scholarship in the past decade yet, with a lot of identified gaps calling for the attention of scholars, practitioners and policymakers. There is a need, therefore, to interrogate genderspecific factors that predispose women's substance abuse as well as understand some of the social, biological and psychological practices underlying these gender dynamics in substance abuse so as to design sustainable responses and or treatments for victims. As noted earlier in this paper, there are several negative effects associated with substance abuse. More, specifically, are some consequences peculiar to women who abuse drugs such as hormonal imbalance, infertility, foetal defects and/or death and mental health problems. Some of these peculiarities to females' substance abuse have been linked to the biological makeup of women and also, gender roles conferred on women through culture and religion (NIDA, 2020). According to Clancy (2022), women become addicted to drugs and substances after using smaller doses and for shorter periods as compared to men, they can be more sensitive to the effects of substances abused, the menstrual cycle could affect a female's withdrawal symptoms and can result into a relapse. It was further revealed that women are more likely to die from an overdose of certain drugs than men (VanHouten, Rudd, Ballesteros and Mack, 2019; NIDA, 2020).

Drug abuse has been described by the United Nations Office on Drugs and Crime (UNODC, 2019) as an emerging global public health issue. According to them, the recent world drug report-2019 estimated that 271 million (5.5%) of the global population (aged between 15 and 64 years), had used drugs in the previous year. In Nigeria, drug and other substance abuse are fast becoming a psycho-social and health concern in recent times (Jatau, Sha'aban, Gulma, Shitu, Khalid, Isa, Wada, and Mustapha, 2021). This is despite the existence of the National Drug Law



Enforcement Agency (NDLEA), National Drug Control Master Plan (NDCMP) and the Presidential Advisory Committee for the Elimination of Drug abuse in Nigeria anti-drug laws (PACEDA) and several other measures put in place to reduce the proliferation of hard drugs and harmful substances in the nation. Jatau, et. al. (2021) estimated drug users in Nigeria at 14.4 per cent i.e. 14.3 million people aged between 15 and 64 years. The report revealed the extent of drug use in Nigeria as comparatively high when compared with the 2016 global annual prevalence of any drug use of 5.6 per cent among the adult population. Using a gender lens, the United Nations Office on Drugs and Crime (UNODC, 2018) states that one out of four drug users in Nigeria is a woman. This is a pointer to the changes that are occurring in gender roles and a prediction of emerging future threats and insecurity in Nigeria.

The epidemiology of substance abuse among displaced persons is becoming an emergency occurring at an unprecedented rate (Horyniak, Melo, Farrell, Ojeda and Strathdee, 2016). Several factors such as exposure to traumatic experiences, acculturation and socio-economic challenges, co-morbid mental health issues, systemic discrimination and stereotypes have been elucidated as responsible for substance abuse among displaced persons (Fazel, Wheeler and Danesh, 2005). Noteworthy is the fact that many of the extant studies on this issue or subject matter were carried out using western perspectives especially as it concerns refugees, IDPs and forced migrants. Specifically, the inappropriate use of drugs and substances among IDPs in Nigeria has not been adequately interrogated in scholarship. More so, is the gender dynamics unfolding in drugs and substance abuse, especially among IDPs, who have suffered multiple jeopardies through disaster, displacement and accompanied trauma, a lacuna in the study of IDPs and substance abuse?. The reasons for drug/substance abuse, accessibility, addiction rates, immediate and future consequences on the users and society have not been adequately studied. Scholars have focused on issues bordering on the health, especially of women and children (Ajakaye and Ibukunoluwa, 2019; Olakunde, Mamadu, Olaifa and Wakdok, 2016), education (Nemine and Zalakro, 2019), coping mechanisms (Akume, 2015; Adewale, 2016) among others. As noted earlier in this paper, there is a plethora of studies on drug abuse and its effects in Nigeria (Pela and Ebie. 1982; Abiodun, 1991; Famuyiwa, Aina and Bankole-Oki, 2011; Ihezue, 1988; Adelekan, Abiodun, Obayan, Oni, and Ogunremi, 1992). Many of these studies were carried out among adolescents and youths, drivers, and health workers (mostly males) while overlooking the IDPs, especially the females. More recently, are news emerging from daily newspapers and magazines on the threats of drug and substance abuse among women in the northern region of Nigeria (Adams, 2019). However, further studies are required in the area to document the data subset as well as the statistical representation of women involved in substance abuse in Nigeria. This study, therefore, is geared towards filling a significant gap in scholarship (Johnson, 1996) by delving into the abuse of drugs and substances among the females in selected IDP camps in the Federal Capital Territory, Abuja, Nigeria.

# Theoretical Framework

Travis Hirschi's Social Bonding Theory was adopted for this study. According to Hirschi (1969 in Chriss, 2007), crime is learnt by good people who live in bad environments. Gwynn Nettler (1984: 313) puts it thus "If we grow up naturally, without cultivation, like weeds, we grow up like weed". Indeed, lack of control has been linked to improper attitudes by individuals not subjected to controls. Social bonding theory is thus about the role of social relationships that bind people to the social order and prevent antisocial behaviour. Hirschi (1969) describes the four elements of the social bond; thus, attachment, commitment, involvement, and belief that result in conformity with prosocial behaviour. According to him, attachment is the emotional component of conformity and the emotional bonds that exists between an individual and social institutions such as family, religion, culture and education. He linked the outcome of attachment to overall feelings of satisfaction, value, respect and a sense of belonging. In essence, it is very easy for a lack of



attachment to family and loved ones to spill over into a lack of decorum. Commitment is described as a situation whereby considerable time and energy have been invested in the pursuit of a lawful career. In order words, people who invest heavily in a lawful career have a valuable stake in conformity and are not likely to risk it by engaging in crime. Next is involvement in legal activities which reduces the burden of involving self in illegal activities. Involvement has been described as the direct consequence of commitment (Nettler, 1984). Lastly, is the belief which has to do with the acceptance of the social norms regulating conduct in a society. The values placed on beliefs and customs may prevent deviation from them.

While Hirsch's four variables of social bonding may not apply to all crimes, it can be said that the lack of these mentioned four social control components may be associated with drug and substance abuse among female IDPs under study. The detachment from family members, friends, loved ones and a well-mastered environment may be responsible for a lack of commitment to appropriate social norms while reinforcing involvement in social vices such as substance abuse and its attendant consequences. Nevertheless, there may be other fundamental theories surrounding deviation from social norms as critiques of Hirsch's theory of Social Bonding Theory state that the motivations to behave normally or defiantly are mostly assumed. They raised the question of whether people deviate because they have a weak conventional value or because they have learned new values (Krohn and Massey, 1980; Agnew, 1985). This study adopted the Social Bonding Theory to analyse the reasons for female IDPs' involvement in drug and substance abuse. This theory is germane to this study because until recently, women from the northern region of Nigeria were reputed as socially reserved, religious, hospitable and well-mannered. Substance abuse seems to be an alien phenomenon adopted as a result of certain life experiences before and during displacements.

# **METHODOLOGY**

This is qualitative research that adopts an explorative research design. This research design is necessary due to the scarcity of data on the subject matter. The design involved in-depth interviews and non-participant observation with women who live in Internally Displaced Person Camps selected for this study namely, Area 1, New Kuchingoro and Kuje IDP Camps. The study engages a total of three (3) IDP camps for its analysis. These camps were purposively sampled due to their convenience and accessibility. Another reason for the choice of study location was seated against the backdrop of security as many IDP camps in the Northeast have been under incessant attacks hence leading to the movement of many displaced persons from that area to IDP camps in the Federal Capital Territory of Nigeria. This study was preceded by the researcher's observation during a previous study on the objectification of women's bodies by insurgents in Northeast Nigeria (Agbaje, 2020). It was revealed that one of the coping mechanisms by displaced women and young girls was using hard drugs and a mixture of local contents as stimulants and/or sedatives. Homogenous purposive sampling was used to select the three camps for this study. This is because of the peculiar similarities in socio-cultural beliefs and practices among the study population. Each camp has over one thousand occupants. The researcher employs this sampling method to analyse the context of interrogation while using discretion to choose variables that can provide relevant information. The major population of these camps are people displaced from Northeast Nigeria by the Boko Haram insurgency. The camps comprised men, women, and children (some unaccompanied). However, more than half of the population in all three selected IDP camps are females. Thus, this study focuses on women who are either directly engaged in substance abuse or are closely related to an abuser. This research method reduced variation, simplified analysis and facilitated in-depth interviews. The population for this study consisted of a total of 53 individuals out of which 21 are women while 25 are young girls (adolescents and youths). Five camp officials and two security personnel also participated in the study. In specific terms, in-depth interviews were conducted with 16 persons in Kuje Camp,



20 persons in the New Kuchingoro Camp and 17 persons in Area 1 Camp. The target population are people who had direct exposure, contact and experience with the problem understudy. All necessary ethical considerations have been submitted to the Ethics committee, Research Management Office, University of Ibadan

Data were collected from both primary and secondary sources. Primary data were collected through in-depth interviews and non-participant observation. Secondary data was derived from books, journal articles, newspapers and magazines and the internet. Primary data were collected using an unstructured interview guide carefully designed for fieldwork. This improved discussions during research and proved less threatening to individuals as it allowed an easier flow of information. Rapport was created and the researcher had to repeat visitations before gaining the confidence of some of the research participants. Initially, the research was faced with limitations in the forms of inaccessibility, lack of interest by prospective study participants and lack of funds to provide incentives to study participants (daily needs: soaps, clothes, food items and sanitary materials). Concerted efforts were made to overcome these challenges. To obtain viable data for this study, the researcher engaged a number of the targeted community as research assistants. They helped in convincing their peers to participate in the study, make translations and further reinforced the assurances of anonymity and that any information given will be used purely for academic purposes. Collected data were content analysed using a systematic interpretation of words and the meaning thereof, in relation to the subject matter.

# **DISCUSSION OF FINDINGS**

This study examines the trends and factors responsible for the increased use of hard drugs by young girls and women in IDP camps in Nigeria. The common types of drugs and substances abused by them, the implication for human security and some of the effective ways of tackling the menace were the focus of this research. Due to the consistent unrest in the Northeast region of Nigeria, scores of Nigerians are fleeing the area to the Federal Capital Territory (FCT). According to Peace Foundation (2021), the number of displaced persons in Abuja alone is over 21,000 people. The report stated that while some are living in identified camps, numerous IDPs are living in unidentified areas in Abuja. However, this study is limited to three purposively selected IDP camps; Area 1, New Kuchingoro and Kuje Camps. Due to the priority given to displaced persons within the Northeast region, the selected camps in the Federal Capital Territory are managed by National Emergency Management Agency (NEMA), FCT Emergency Management Agency (FEMA) and through donations from civil societies, Non-governmental Organisations, religious and corporate bodies and individuals. The inadequate attention given to these camps has created a lot of difficulties for the occupants. Thus, it is not uncommon to find IDPs in deplorable situations presented in forms of hunger, diseases, lack of shelter and poverty. Even though the Nigerian government announced its intention to shut down the IDP camps in the FCT by July 2021 (Mbah, 2020), the camps are still functioning. The reason is because of the continued insurgency in the Northeast coupled with the fact that sufficient measures have not been put in place for the repatriation of displaced persons. These camps, therefore, are saddled with several challenges in the forms of a lack of basic social amenities like electricity power supply, clean water, sanitary facilities, schools, clinics and access to employment among others. Many of these identified challenges have received scholarly attention in recent times (Adewale, 2016; Askederin, Omole, Shonibare, 2014; Wajid, Akhunzada, Qadir, Magsood, Rasool, Raza, Rahman, 2015). The already identified problems in scholarship are currently clustering into several human security issues that have not been properly addressed among which are increased vagrancy, unaccompanied children, congestion in urban areas, sex trafficking and hard drugs-related issues (Ugwa, 2021). This study is focused on hard drugs and substance abuse issues specifically. among female IDPs.



Several unspeakable issues are going on among female IDPs. Some of these issues were caused by the spillover effects of the trauma of conflict and eventual displacement while some were only aggravated by the entrenched patriarchy in the society. However, emerging issues such as drugs and substance abuse and at times, leading to addiction among females, have been discovered to possess mixed causal factors among the study population. Even though several hard drugs have been identified as prevalent among the Nigerian populace, not all drugs are commonly abused by female IDPs. The NDLEA mentioned that over 15 million Nigerians take hard drugs (Olaoluwa, 2022). The following drugs are commonly found on the street;

Table 1:Common Drugs Abused in Nigeria

Scientific Name	Street Name
Cannabis/Hemp/Marijuana	Igbo, Eja, Pot, Ganja
Opioids (Tramadol, Codeine)	Aunty Nora, Trabaye,
Amphetamine, Methamphetamine, Hallucinogens, Solvents/inhalants, Cough Syrups (containing codeine or dextromethorphan)	Ecstasy, Molly, sugar,

Author's Fieldwork (2021)

The drugs in the table above are most reported while discussing substance abuse in Nigeria (Eze and Omeie, 1999; Unva and Onva, 2020), The prevalent drugs used by young girls and women in the selected camps are Methamphetamine, cough syrups (containing codeine or dextromethorphan), Opioids and sedating antihistamines (Piritons, Panadol extra, Tramadol etc.) (IDI, 2021). These drugs, when abused, may have psychotic disturbance in the forms of hallucinations, paranoia, drowsiness/sleepiness, euphoria and a false sense of ability (Nutt, King, Saulsbury, Blakemore, 2007). The drug goes straight to the brain, liver and kidney and may trigger loss of memory, internal organ damage, blindness, cardiac seizure and death (Ibrahim, Mahmud, Abubakar, Harazimi, and Abdulkadir, 2016; Jaffe, 1975). However, there are other substances abused by females in IDP camps. For example, some interviewees acknowledged that they inhale solutions such as gum or glue. This study discovered that inhaling adhesive substance such as glue gives a sense of euphoria hence the abuser tend to use these substances to experience a temporary feeling of excitement and intense happiness. Noteworthy is the fact that it is very common and cheap and thus affordable by the abuser. This practice has been linked to several health hazards such as addiction, convulsion, coma and death (Stotts, 2022). Others mentioned that they drink locally mixed substances such as food seasonings, mint, fizzle drinks and alcoholbased drinks (Monkey Tail, Paraga, Shepe, Obe Meje). The very poor among substance abusers would settle for digging up and inhaling sewage tanks, graves and lizard droppings among other appalling substances abused by some female IDPs in Nigeria (IDI, 2021). All of these substances,



according to study participants, act as sedatives and intoxicants that enable them to cope with the memories of the crisis that led to their displacements and the hardships faced at the camp.

This study identified some factors responsible for substance abuse among female IDPs in Abuja. The first identified reason for substance abuse in IDP camps is associated with Post-Traumatic Stress Disorder (PTSD). The interviewed females indicated that severe emotional harm suffered during Boko Haram attacks in the forms of loss of friends, family and loved ones, badgering, sexual violence, injury and displacement are all fearful experiences not easily overcome by them hence justifying the use of available drugs or substance to alleviate pains and numb emotions. The experiences of the examined IDPs are not far-fetched in what Travis Hirschi described as the detachment from the conventional society causing weak bonds capable of triggering deviation from social norms. In the words of a study participant during an In-depth interview (IDI) session;

I find it difficult to sleep naturally since I got here... I usually have nightmares of the experience back home. So, I can only sleep with the help of drugs (In-depth interview, 2021).

Trauma has been described as an event or series of circumstances that have lasting effects on your mental, emotional, physical, social and spiritual well-being (Kleber, 2019). Trauma causes high levels of stress in the mind and body. This way, it is physically and emotionally harmful and can be life-threatening. It can trigger severe stress which in turn, causes the release of cortisol and/or adrenaline (hormones that control the body's fight-or-flight response) (Davis, Nolen-Hoeksema and Larson, 1998). Interviewed female IDPs mentioned insomnia, paranoia, nightmares, anger and fear as some of the negative emotions they go through daily. According to a study participant:

This is not my home, there's no help and I feel heavy at heart. I may run mad if I don't take something to ease the pain (IDI, 2021).

Indeed, the link between exposure to traumatic events and substance use has been demonstrated in research (Olanrewaju, Olanrewaju, Omotoso, Alabi, Amoo, Loromeke and Ajayi, 2019; Waldrop and Cohen, 2014). Young girls and women, who have experienced the terror of attacks by insurgents and have witnessed criminal activities responsible for their displacement, turn to substances that can help them deal with pain, grief, anxiety and bad memories. This is germane to Muhammad's (2016) position that there is a nexus between drug abuse, global terrorism and insecurity. He further mentions that the Boko Haram insurgency can be held responsible for the upsurge in drug abuse and addiction in the northeast region of Nigeria.

Another cause of trauma leading to substance abuse among women is sexual abuse during and after conflict or at the IDP camp. Sexual violence leads to sexual infection and diseases, deformation, unwanted pregnancy and diverse emotional problems. Victims of sexual violence at camps often turn to drugs to overcome the shame, guilt and depression associated with their experience (Kunst, 2020). An interviewee with a child stated that she was raped by unknown men and had to bear the brunt of caring for a fatherless child. She expressed her pain of going through such a brutal experience and started drinking heavily to escape the painful reality before her (IDI, 2021). Undoubtedly, victims of sexual violence in the selected IDP camps are using drugs and substances as coping mechanisms to live. Again, true to Hirschi's (1969) postulation, an abused person feels betrayed by society and may lack the willingness to commit or get meaningfully involved in that society due to the trauma suffered.

Another leading cause of substance abuse in IDP camps is the lack of material resources. The women are poor and cannot afford decent living; food, clothing, sanitary materials, education, proper health care, and decent jobs among several other human necessities. It was observed that many of the displaced persons live in a tattered shelter while some even sleep in an open space.



They are exposed to diseases and torture (Non-participant observation, 2021). An interviewee mentioned that there are times when they have nothing to eat for days.

We take 'things' to suppress hunger because we have no food to eat (IDI, 2021). Thus, hopelessness, instability and anxiety are some of the reasons associated with females' substance abuse in IDP camps. This is germane to the theory adopted for this study. More specifically, is the involvement component of social bonding theory which may be lacking among female IDPs who are privy to substance abuse. In addition, it can be inferred that poor people will always devise a way of making illegal money through drug sales, commercial sexual activities, hooliganism among other crimes and hard drugs and substances are often used in carrying out these illegal activities. A study participant posits that drugs and substances can be used to suppress or forget your situation at the camp (IDI, 2021). While some drugs are expensive and hard to access for IDPs, there are cheap (sometimes non-prescriptive) drugs that can be easily accessed and used in the selected camps. Also, there are some substances produced from local materials used as stimulants, sedatives and energy boosters by girls and women in IDP camps. Older women lament the loss of their loved ones and the lack of capacity to provide for their children as experiences that are hard to live with without the help of drugs. They emphasised that the Nigerian government has abandoned them, and they have no constant means of survival (IDI, 2021).

Another consequence of poverty in IDP camps is the resolution of girls and women to engage in sex for money. Engaging in sex for personal gain is a social vice common in Nigerian IDP camps. Recently, the current governor of Borno State (which is the epicentre of Boko Haram attacks) listed increased prostitution, drug abuse and thuggery as some of the reasons for closing down IDP camps in Borno State (Okoye, 2022). Prostitution is sometimes seen as a last resort for livelihood by displaced females living in ignored and dysfunctional squalors and they use hard drugs and substances to cope. Some of the substances abused are aphrodisiacs to aid their sexual performance.

...when you take drugs, you are no longer afraid and can do anything to satisfy your 'customer' so that you can make a lot of money (IDI, 2021).

Noteworthy is the fact that displaced females whose parents are deceased are more likely to be predisposed to prostitution than the ones with living parents. It has also been revealed by the International Centre for Investigative Reporting (ICIR) that females in IDP camps are being targeted by sex traffickers who sometimes disguise themselves as prospective employers who are willing to provide jobs (Ugwu, 2021). While scholars have delved into the act of prostitution among young Nigerians using other spheres such as secondary and tertiary institutions as categories of analyses (Ibu and Eru, 2018; Terhile and Pinga 2017; Ibu, 2010; Ibu and Asuquo, 2017), growing malaise among displaced persons living in IDP camps have not received adequate scholarly attention.

Asides from the aforementioned causes of substance abuse among the displaced females in selected IDP camps in Abuja are other identified psychosocial factors responsible for substance abuse such as peer pressure, marital challenges, financial gains, poor self-image and outright ignorance. Some of the interviewed study participants claimed that they take substances to satisfy their husbands or lovers. Some of them were introduced to these substances by their partners. Also, some are involved in substance abuse due to peer pressure and imitations borne out of ignorance. Other factors are loneliness, depression and fatigue (IDI, 2021).

...It makes me happy, and I sleep well...I did not know that it is bad for my health (IDI, 2021). Note that displaced women also grapple with gender issues preventing self-fulfilment, just like their counterparts elsewhere in the world and the need to fill the void can lead to drug abuse. In other words, the stress of being a woman drove many to drink or use other substances to self-soothe (Clancy, 2022). Furthermore, some IDPs abuse drugs due to chronic pain. These women



use drugs to manage pains without expert supervision, leading to addiction and its attendant effects. According to Clancy (2022), women can become addicted to drugs after using smaller doses and for shorter periods than men. She further explains that women can be more sensitive to the effects of certain drugs because of sex hormones; they experience different changes in their brains. A woman's menstrual cycle could affect her withdrawal symptoms and the likelihood of relapse in addiction recovery and women are more likely to die from an overdose of certain drugs than men (Clancy 2022). Some of the interviewed women are not aware of the dangers associated with substance abuse. This study, therefore, examines the linkage between the usages of substances mentioned in this paper and human security using four out of the seven components of human security as a mirror of reference - health, community, personal and economic security. The implications of substance abuse on the abuser and society are of utmost concern to this study.

It has been established that women face unique health issues when it comes to substance use because they are more sensitive to the consumption and long-term effects of alcohol and drugs than men. (Greenfield, Back, Lawson, and Brady, 2010). These unique issues are informed by both the biological makeup and socially constructed roles of women in society. A female substance abuser stands the risk of psychosomatic disorder manifesting as addiction, anxiety, mood swings, depression or elevated mood, euphoria, hallucinations, schizophrenia and suicide (Newman and Mello, 2009). High-risk (sexual, injections) behaviours leading to high rates of infections such as herpes, hepatitis, HIV/AIDS, Corona Virus and unwarranted deaths have been associated with substance abuse. Females of childbearing age may experience infertility while drugs and substances used during pregnancy can harm both the mother and the child. It can cause a risk of stillbirth, floppy baby, neonatal withdrawal/Abstinence syndrome, birth defects and sudden infant death syndrome (Wagner and Anthony, 2007). Other health hazards are blood clots in the brain, diabetes, osteoporosis, hypertension, internal organs (liver, kidney, pancreas etc.) diseases and different forms of cancer (organ, Baer, Albert, Judd, Brown, Corle, Campbell, Hartman, Tejpar, Clevidence, Beverly, Giffen, Chandler, Stanczyk, and Taylor, 2001). Nevertheless, an extensive study is still needed to indicate all health problems associated with females' substance abuse

The study discovered some economic consequences of substance abuse. First, substance abuse can lead to a lack of productivity. Noteworthy is the fact that a displaced person is already facing jeopardy of displacement with its diverse problems and thus, lack of productivity can only aggravate the situation. The reason for this conclusion is based on the dependency of a substance abuser hence causing her to constantly seek drugs even when she is not financially capable. The result of this is financial debt. Also, drug abuse works on the central nervous system and can lead the user into an impulsive purchase and/or selling of their personal/family belongings. The consequence of this sudden urge to spend any available money is that an already impoverished IDP becomes even poorer (IDI, 2021). This is an antecedent to community insecurity as an abuser of drugs can resort to committing crimes either to make money or out of outright drug effects. The interviewed security persons acknowledged that 80% of criminals either admit or are tested for drugs while committing the crime. In other words, the high rate of crime commission can be traced to the high rate of substance abuse in a society (Jatau Al, Sha'aban, Gulma, Shitu, Khalid, Isa, Wada and Mustapha, 2021). Crimes associated with drug use are robbery fraud, violence and hooliganism, banditry/terrorism, murder and suicide. The current crime discovered among the study population is limited to theft, suicide and prostitution. However, future research should focus on the nexus between gender and crime commission under drug or substance influence. Further research is also needed to explore the other IDP camps in Nigeria for a comparative analysis of substance abuse among the occupants. Finally, research on the changing gender roles that may arise as a result of females depending on drugs for functionality should be embarked upon. This is especially critical as northern Nigerian women are reputed for their reserved nature and



religiosity as custodians of culture (Abdu-Waba, 2018; Effah-Attoe, 2004)). Many of the study participants are from the *Kanuri* ethnic group. According to them, traditional Kanuri women are strong and take care of the family. They keep animals and are not known for unruly behaviour. Emphatically, the *Kanuri* tradition abhors women to eat in an open space (IDI, 2021). Some of the women express the gravity of the problem at hand by projecting the type of society that will subsist after the Boko Haram insurgency is over and IDPs are repatriated back to their states of origin.

### **Conclusion and Recommendations**

This paper has been able to reveal that while substance abuse is engaged by abusers in the selected IDP camps to experience the pleasurable effects on the brain, it can result in undesirable consequences such as addiction, mental disorder, poor health and even, death. This study's exploration into the growing use of illicit drugs and substances in selected IDP camps in the Nigerian Federal Capital Territory is a genuine call to the relevant Nigerian government agencies and stakeholders to swiftly avert the dire consequences that may arise. Some drugs and procured substances are easily and cheaply available among the IDPs. Also, while many substance users gave reasons associated with the emotional pains experienced due to insurgency, few users were involved for recreation and health reasons. Given the human security challenges posed by unchecked substance abuse in any society, this paper thus recommends the following;

First, the government should direct the relevant authorities such as the NDLEA, Police Force and the Civil Defence Corps to check the growing abuse of drugs in the country, especially, among the IDPs. There is a need to research more on some of the unconventional substances abused with to identify some of the health and security issues and risks associated with them and hence provide ways of mitigating against its common accessibility. It is also the responsibility of the government to provide food, shelter, medications, education, sanitary materials, jobs and all basic amenities such as clean water, and electricity, among all the other necessities that will make life easy for displaced persons. This recommendation stemmed from the fact that many of the interviewed persons claimed they engaged in substance abuse due to hunger, anger, weakness, depression, boredom, sadness and pain.

Furthermore, trauma healing processes should be treated as a matter of urgency as soon as IDPs arrive at a camp. Government, therefore, should engage counsellors, Non-Governmental Agencies and experts in providing necessary aid in terms of counselling, material needs, vocational training and advocacy for displaced persons living in camps. In a similar vein, persons already involved in drugs and substance abuse should be handed over to professionals with special attention paid to the addicted ones. This is because drug addiction is a huge burden that can only be managed by professionals such as psychiatrists and psychologists who will combine several medical and mental therapies to systematically rehabilitate addicts to their normal lives. The study suggests that if possible different rehabilitation centres should be built across the nation to solely address gender-specific substance abuse issues. This way, victims will feel safe and may likely connect more in their bid to conquer their bad behaviours. Moreover, capacity building in the forms of training workshops, sensitisation, formal and informal peace education and skill acquisition are all key steps in creating a shift from drug abuse to living hopeful and meaningful lives among female IDPs. Lastly, perhaps, quick resettlement of IDPs in their original homes may help in stabilising their states of mind and thus provide them with the solace of reconnecting with their original place of abode and rebound them not only with their family and friends but also, their respected socio-cultural and religious value systems. In essence, all hands must be on deck as government, scholars, practitioners, health workers, security personnel, individuals and all stakeholders must rescue the IDPs from the menace of substance abuse.

#### REFERENCES

- Abdu-Waba, P., Amadou, A.M. and Hilse, G. (2018). *Bayajida: The Legend of Hausa Land*. Germany: Gerda Henkel Foundation.
- Adams, S. (2019). How Drug Abuse is Wrecking Female Lives in Northern Nigeria. Retrieved from: http://saharareporters.com/
- Adelekan, M. L., Abiodun, O.A., Obayan, A.O., Oni, G. and Ogunremi, O.O. (1992). Prevalence and Pattern of Substance Use among Undergraduates in a Nigerian University. *Drug Alcohol Depend*, 29(3): 255–261.
- Adenugba, A.A. and Okeshola, F.B. (2018). Substance Abuse among Females in Nigeria. *International Journal of Business and Social Science*, 9(5); 99-105.
- Adewale, S. (2016). Internally Displaced Persons and the Challenges of Survival in Abuja. *African Security Review.* 25(2): 176-192.
- Agbaje, F.I. (2019). "Beyond Women; Engendering Violent Conflicts in Africa." In Bogoro E.S., Meyer, M and Danjibo, N.D. (eds.), Readings in Peace and Conflict Essays in Honour of Professor Isaac Olawale Albert, 619-626. Abuja: SPSP.
- Agbaje, F.I. (2020). The Objectified: Female Body and the Boko Haram Insurgency in Northeast Nigeria: Insights from IDP camps in Abuja. *African Security Review*, 29(1): 3-19.
- Agnew, R. (1985). Social Control Theory and Delinquency: a Longitudinal Test. Criminology, 23(1): 47-61.
- Ajakaye, O. G. and Ibukunoluwa, M. R. (2019). Prevalence and risk of Malaria, Anaemia and Malnutrition among Children in IDPs Camp in Edo State, Nigeria. *Parasite Epidemiology and Control*, 29(8): 127.
- Akume, A. (2015). The Question of Internally Displaced Persons (IDPs) in Nigeria: A Reflection on Present Realities. *Journal of Third World Studies*, 32(1): 221-244.
- Akuto, G.W. (2017). Challenges of Internally Displaced Persons (IDPs) in Nigeria: Implications for Counselling and the Role of Key Stakeholders. *International Journal of Innovative Psychology & Social Development* 5(2):21-27.
- Alegria A. A., Hasin, D.S., Nunes, E.V., Liu, S.M., Davies, C., Grant, B.F., Blanco, C. (2010). Comorbidity of Generalized Anxiety Disorder and Substance Use Disorders: Results from the National Epidemiologic Survey on Alcohol and Related Conditions. *Journal of Clinical Psychiatry*, 71(9): 1187-1195.
- Askederin, F. M., Omole, D. K. and Shonibare, D. O. (2014). The State of Internally Displaced Persons Camps in Nigeria: A Case Study of Durumi Camp in the Federal Capital Territory of Nigeria. *Texila International Journal of Academic Research* 8(4): 6.
- Baler, R.D. and Volkow, N.D. (2006). Drug Addiction: The Neurobiology of Disrupted Self Control. *Trends in Molecular Medicine*, 12(12):559–566.



- Campbell, L. J. (2016). "Islamist Ritual Killing: Al Qaeda, Islamic State and Boko Haram Case Studies", in Bunker R.J.(ed.), *Blood Sacrifices: Violent Non-State Actors and Dark Magico-Religious Activities*, 334. Tennessee: Universe Publisher
- Chriss, J. J. (2007). The Functions of the Social Bond. The Sociological Quarterly, 48(4): 689-712.
- Clancy, C. (2022). Substance Abuse Among Women: Why Women Use Drugs. Murfreesboro: Journey Pure Publication.
- Comolli, V. (2015). Boko Haram: Nigeria's Islamist Insurgency. London: Hurst and Company.
- Davis, C.G., Nolen-Hoeksema, S. and Larson, J. (1998). Making Sense of Loss and Benefiting from the Experience: Two Construals of Meaning. *Journal of Personality and Social Psychology*, 75(1): 561–574.
- Dorgan, J.F., Baer, D.J., Albert, P.S., Judd, J.T., Brown, E.D., Corle, D.K., Campbell, W.S., Hartman, J.J., Tejpar, A.A., Clevidence, B., Giffen, C.A., Chandler, D.W., Stanczyk, F.Z., and Taylor, P.R. (2001). Serum Hormones and the Alcohol-breast Cancer Association in Postmenopausal Women. *Journal of the National Cancer Institute*, 93(9):710–715.
- Effah-Attoe, S. (2004). Women in the Development of Nigeria Since Pre-Colonial Times. *Lincoln Journal of Social and Political Thought*, 3(1): 1-10.
- Ezard N. (2012). Substance use among populations displaced by conflict: a literature review. *Disasters*, *36*(3), 533–557. <a href="https://doi.org/10.1111/j.1467-7717.2011.01261">https://doi.org/10.1111/j.1467-7717.2011.01261</a>.
- Eze, J.E. and Omeje, N. (1999). Fundamentals of Substance Abuse. Enugu: Snaap Press
- Famuyiwa, O, Aina, O.F. and Bankole-Oki, O.M. (2011). Epidemiology of Psychoactive Drug Use amongst Adolescents in Metropolitan Lagos, Nigeria. *European Child and Adolescent Psychiatry*, 20(7): 351–359.
- Fazel, M., Wheeler, J. and Danesh, J. (2005). Prevalence of Serious Mental Disorder in 7000 Refugees Resettled in Western Countries: A Systematic Review. *The Lancet Medical Journal*, 365: 1309–1314.
- Greenfield, S. F., Back, S. E., Lawson, K. and Brady, K. T. (2010). Substance Abuse in Women. *The Psychiatric Clinics of North America*, 33(2), 339–355.
- Grucza, R.A., Norberg, K. and Bucholz, K.K. (2008). Correspondence between Secular Changes in Alcohol Dependence and Age of Drinking Onset among Women in the United States. *Alcohol Clinical and Experimental Research*, 32(8): 493–501.
- Hirschi, T. (1969). Causes of Delinquency, Berkeley, California: University of California Press.
- Horyniak, D., Melo, J.S., Farrell, R.M., Ojeda, V.D. and Strathdee, S.A. (2016). *Epidemiology of Substance Use among Forced Migrants: A Global Systematic Review*. Retrieved from: <a href="https://journals.plos.org/plosone/">https://journals.plos.org/plosone/</a>
- Ibrahim, H.A., Mahmud, S., Abubakar, A., Harazimi, A.A., and Abdulkadir, S. (2016). Effect of Drug Abuse among Youth and its Impact on Learning. *IOSR Journal of Pharmacy and Biological Sciences*, 11(1): 14-17.
- Ibu, J. and Eru, E. (2018). Drug Abuse and Prostitution Tendency among Female Undergraduate Students in Three Universities in South-South Nigeria. *International Journal of Innovative Research and Advanced Studies*, 5(2): 1-8.
- Ihezue, U. (1988). Drug Abuse among Medical Students at a Nigerian University: Prevalence and Pattern of Use. Journal of the National Medical Association, 80(1): 81.
- lyi, J.M. (2018). The Weaponisation of Women by Boko Haram and the Prospects of Accountability. New York: Springer.
- Izu, I. and Dele, I. (2021). Terrorism and Displacement in Nigeria's Northeast: Implications for Development. Retrieved from: https://www.researchgate.net/publication/
- Jaffe, J.H. (1975). "Drug Addiction and Drug Abuse". In L.S. Goodman & A. Gilman (eds.), *The Pharmacological Basis of Therapeutics*, 284-324. New York: MacMillan.



- Jatau, A.I., Sha'aban, A., Gulma, K.A., Shitu, Z., Khalid, G.M., Isa, A., Wada, A.S. and Mustapha, M. (2021). The Burden of Drug Abuse in Nigeria: A Scoping Review of Epidemiological Studies and Drug Laws. *Public Health Reviews*. 29(1): 42.
- Johnson T. P. (1996). Alcohol and drug use among displaced persons: an overview. Substance use & misuse, 31(13), 1853–1889. https://doi.org/10.3109/10826089609064003
- Kleber, R. J. (2019). Trauma and Public Mental Health: A Focused Review. Frontiers in Psychiatry, 10: 451.
- Krohn, M. and Massey, J. (1980). Social Control and Delinquent Behavior: An Examination of the Elements of the Social Bond. The Sociological Quarterly, 21(4): 529-544.
- Kunst, J. (2020). The Link between Sexual Abuse and Addiction. Retrieved from: https://www.amethystrecovery.org/
- Mbah, C. (2020). IDPs Camps in Abuja. Retrieved from: https://peacesignsite.wordpress.com/
- Muhammad, M. (2016). Periscoping the Impacts of Drug Addiction in IDP Camps. Retrieved from: https://newsrescue.com/
- Nemine, E.B. and Zalakro, J.L. (2019). Educating Children in Internally Displaced Persons (IDPs) Camps Through Blended Learning: Prospects and Challenges. *International Journal of Education, Learning and Development,* 7(4): 152-164.
- Nettler, G. (1984). Explaining Crime. New York: McGraw-Hill.
- Newman, J.L. and Mello, N.K. (2009). "Neuroactive Gonadal Steroid Hormones and Drug Addiction in Women." In Brady, K.T., Back, S.E. and Greenfield, S.F. (eds.), *Women and Addiction: A Comprehensive Handbook*, 35-64. Guilford Press: New York.
- NIDA (2020). Sex and Gender Differences in Substance Use. Retrieved from: https://nida.nih.gov/
- NIDA (2020). Substance Use in Women; Drug Facts. Retrieved from <a href="https://nida.nih.gov/publications/drugfacts/substance-use-in-women/">https://nida.nih.gov/publications/drugfacts/substance-use-in-women/</a>
- Nutt, D., King, L. A., Saulsbury, W. and Blakemore, C. (2007). Development of a Rational Scale to Assess the Harm of Drugs of Potential Misuse. *The Lancet Medical Journal*, 369 (9566): 1047–1053.
- Okoye, F. (2022). Prostitution, Drug Abuse behind Closure of Borno IDP Camps. Retrieved from: https://leadership.ng/
- Olakunde, B.O., Mamadu, I., Olaifa, Y. and Wakdok, S. (2016). Internally Displaced Persons (IDPs) and HIV in Nigeria: Outcome of HCT Outreach to IDP Camps in Northeast Nigeria. Retrieved from: <a href="https://www.hilarispublisher.com/">https://www.hilarispublisher.com/</a>
- Olanrewaju, F. O., Olanrewaju, A., Omotoso, F., Alabi, J. O., Amoo, E., Loromeke, E., & Ajayi, L. A. (2019). Insurgency and the Invisible Displaced Population in Nigeria: A Situational Analysis. SAGE Open. https://doi.org/10.1177/2158244019846207
- Olaoluwa, J. (2022). "Fifteen Million Nigerians take Hard Drugs NDLEA". Retrieved from: https://www.icirnigeria.org/
- Olufadewa, I. I., Adesina, M. A., Oladele, R. I., & Ayorinde, T. A. (2022). "Watching my family being killed by terrorists made me really depressed": Mental health experiences, challenges and needed support of young internally displaced persons in northern Nigeria. *Journal of migration and health*, 6, 100121. <a href="https://doi.org/10.1016/j.jmh.2022.100121">https://doi.org/10.1016/j.jmh.2022.100121</a>
- Pearson, E. (2018). Boko Haram Beyond the Headlines: Analyses of Africa's Enduring Insurgency. New York: United States Military Academy.
- Slack, M. (2017). Women as Victims of War. SABINET African Journal, 27(4): 36-40.



- Stanford, M. (2014). Literature Review: A Review of the Research on the Treatment of Substance Use Disorders. County of Santa: Synergia Consulting.
- Stotts, I (2022). Sniffing Glue: The Danger of Abusing Inhalants. Retrieved from: https://addictionresource.com/
- Ugwa, J. (2021). "Sex Traffickers Target Teenage Girls in Nigeria's IDP Camp". Retrieved from: https://www.icirnigeria.org/
- UNESCO (2019). Migration, Displacement and Education: Building Bridges not Walls. Global Education Monitoring Reports, United Nations Educational, Scientific and Cultural Organization. Retrieved from: <a href="https://en.unesco.org/gem-report/2019/migration">https://en.unesco.org/gem-report/2019/migration</a>
- UNODC (2017). The Drug Problem and Organized Crime, Illicit Financial Flows, Corruption and Terrorism. Vienna, Austria: United Nations.
- UNODC (2018). "Drug Use in Nigeria". Retrieved from: <a href="https://www.unodc.org/documents/data-and-analysis/statistics/Drugs/Drug Use Survey Nigeria 2019 BOOK.pdf">https://www.unodc.org/documents/data-and-analysis/statistics/Drugs/Drug Use Survey Nigeria 2019 BOOK.pdf</a>
- UNODC (2019). "World Drug Report 2019." Retrieved from: https://wdr.unodc.org/wdr2019/en/exsum.html
- Unya, I.U. and Onya, U. (2020). The Problem of Drug Abuse Among Nigerian Youths A Historical Perspective. *POLAC Historical Review*, 4(2): 78 91.
- VanHouten, J.P., Rudd, R.A., Ballesteros, M.F. and Mack, K.A. (2019). Drug Overdose Deaths among Women Aged 30–64 Years United States, 1999–2017. *Morbidity and Mortality Weekly Report*, 68(1): 1-5.
- Volkow, N.D., Wang, G.J., Fowler, J.S., Tomasi, D., Telang, F., and Baler, R. (2010). Addiction: Decreased Reward Sensitivity and Increased Expectation Sensitivity Conspire to Overwhelm the Brain's Control Circuit. *Bioessays*, 32(9):748–755.
- Wagner, F.A. and Anthony, J.C. (2007). Male-Female Differences in the Risk of Progression from First Use to Dependence upon Cannabis, Cocaine, and Alcohol. *Drug Alcohol Depend*, 86(2-3):191-198.
- Wajid, A., Akhunzada, A., Qadir, A., Maqsood, N., Rasool, G., Raza, U. and Rahman, R. (2015). Internally Displaced Persons (IDPs); Anxiety and Depression. *The Professional Medical Journal*. 22: 337-342.
- Waldrop, A.E. and Cohen, B.E. (2014). Trauma Exposure Predicts Alcohol, Nicotine, and Drug Problems beyond the Contribution of PTSD and Depression in Patients with Cardiovascular Disease: Data from the Heart and Soul Study. *The American Journal on Addiction*, 23(1):53-61. doi: 10.1111/j.1521-0391.2013.12053.
- Yunusa, A. (2016). The Nature of Substance Abuse among Juvenile Delinquents in Zaria Metropolis of Kaduna State. A Journal of Sociological Studies. 2(1): 9-12.
- Zenn, J., and Pearson, E. (2014). Women, Gender and the Evolving Tactics of Boko Haram. *Journal of Terrorism Research* 5(1): 46-57.