

KEEPING OFF THE GRASS: COMBATting SUBSTANCE ABUSE AMONG NIGERIAN YOUTHS

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Abstract

Naturally, man relies on drugs to cure ailments and maintain a healthy life. Therefore, when used appropriately, drug usage has beneficial and therapeutic effects on people, and its importance cannot be over-emphasized. However, the conundrum lies in the illegal use of drugs by constant and prolonged usage so much that it becomes addictive and harmful to health. In recent times, Nigeria has become the hub for increased substance abuse among youths, becoming a public health concern not just in the country but globally. Substance abuse negatively impacts individuals, families, and society with numerous destructive implications. The central question of this research is whether human rights proffer any solution for combatting drug abuse among Nigerian youths. This research returns a positive answer as adopting a human rights-based approach offers opportunities for combatting substance abuse. The research employs a doctrinal approach using primary and secondary research tools. The research concludes that attaining progress in the fight against substance abuse lies in adopting human rights-based approach principles viz universality, equality, empowerment, participation, and accountability.

Keywords: Abuse, Substance Abuse, Drug Abuse, Human Rights Based Approach.

Introduction

The story of Aiden best exemplifies the problem of substance abuse. At age 14, Aiden smoked marijuana and tobacco multiple times a day. It helped him forget who he was, as the feeling of getting out of his skin was terrific. Since that first hit, he has loved marijuana and always used it to escape his feelings or troubles. He was kicked out of school, continued schooling at home, and did quite well. His family thought it was all over there.

Nevertheless, it did not change his relationship with drugs and alcohol. From what he remembers, all he wanted was to be popular and friendly with his

friends, who were drug addicts. He had no idea of his identity and was bothered about what he had become, but he was helpless and uncontrollable. In the end, he lost everything; a fantastic career, family, and lifelong friends, and he still could not help it.

There are so many Aids in society today. For some, their story of substance abuse begins at ages younger than 14 and graduates to uncontrollable substance abuse, with the consequences usually disastrous for them and their families. Substance abuse poses multiple risks to the individual, family, and society. Some 35 million people are globally estimated to suffer from drug use disorders and require medical treatments before they can lead everyday lives (UNODC, 2019). Likewise, 11 million people injected drugs in 2017, of whom 1.4 million live with HIV and 5.6 million with hepatitis C (UNODC, 2019). In 2020 alone, the number tripled to about 275 million people worldwide using illicit substances. Thirty-six million people have an addiction that threatens their health (UNODC 2020). Over 11 million people inject drugs – half of them live with hepatitis C and one in eight live with HIV (Global Partnerships on Drug Policies and Development, 2021).

In some cases, this is worsened by using contaminated syringes, creating permanent health crises for youths (Global Partnerships on Drug Policies and Development, 2019). Psychological conditions on the use of substances include anxiety and depression, along with social isolation. In 2019 alone, 494,000 people died worldwide from drug use (Global Partnership on Drug Policies and Development, 2019). These practices carry significant health challenges, including increased exposure to HIV, hepatitis B, and other sexually transmitted infections (Jurgens, Csete, Amon, Baral & Beyrer, 2010). Of all substances, cannabis remains the most widely used illicit substance in the African region (WHO, 2021), with the highest prevalence and increase in use reported in West and Central Africa, with rates between 5.2% and 13.5% (Adeparua, 2022). One thriving issue in substance abuse is overcoming the rising and increased cases, especially among youths. Prevention and treatment continue to fall short in many parts of the world, with only one in seven people with drug use disorders receiving treatment each year (UNODC, 2019).

Meaning of substance abuse

A substance has different meanings, but concerning this research, it is a matter of definite chemical constitution deemed harmful and usually subject to a legal restriction (Merriam-Webster Dictionary). Substances that are capable of abuse

are psychoactive substances. A psychoactive substance is a substance taken to alter the way a person feels, thinks, or behaves.

Similarly, drugs are generally defined as substances intended to diagnose, cure, mitigate, treat, or prevent disease. It is a substance usually ingested and intended to affect the structure or function of the body and causes addiction or habituation (Merriam-Webster Dictionary, 2022). Drugs are substances that, when taken, can limit cognition, perception, mood, behavior, and overall body function. Chemical actions can also change biological functions (Balogun, 2006). From the preceding, drugs are identified as substances, and in this work, drugs and substances will be used interchangeably.

Substances typically abused include cannabis, cocaine, heroin, amphetamines, ecstasy, inhalants, and solvents. It also covers alcohol, tobacco, and other natural and manufactured drugs. In the past, drugs were manufactured from natural plants (plants grown) and then converted into cocaine, heroin, and cannabis (or marijuana). Then, in the 20th century, people discovered that drugs could be manufactured from synthetic drugs, including speed, ecstasy, LSD, etc. When these substances are taken in large quantities, it amounts to substance abuse (United Nations Office for Drug Control and Crime Prevention Vienna, 2002).

Abuse can occur when one uses a substance that was not prescribed or recommended by a medical doctor. Substance abuse is the harmful use of psychoactive substances, including alcohol and illicit drugs (World Health Organization, 2021). It is the repeated and harmful use of illegal substances for temperament-altering purposes (Buddy, 2022). The term 'substance abuse' refers to the illegal use of drugs or drug abuse. Naturally, drugs prevent ailments and maintain, promote, and restore good health. However, where a drug is taken in a manner other than is prescribed, it is termed 'drug abuse. This is because it can cause damage to a person's physical, mental, and psychological well-being and, in extreme cases, lead to death.

Similarly, drug abuse has been defined by the World Health Organization (WHO) as the illicit consumption of any naturally occurring or pharmaceutical substance to change how a person feels, thinks, or behaves without understanding or taking into consideration the damaging physical and mental side effects that are caused (World Health Organization, 2021). Drug abuse places a heavy financial burden on individuals, families, and society as prolonged usage requires allocating scarce financial resources (WHO, 2019). It has been stated that the prolonged use of medications can cause severe,

sometimes unalterable physical and social harm and internal damage. (Okafor, 2020). These substances pleasure the user and create a desire for continuous usage (Okafor, 2020). Substance abuse affects the body's neurological functions, wherein a person's moods, perception, consciousness, and energy levels change and take over his/her normal functioning and well-being (Seraphim, 2005). Negligence in the use of any substance, especially those that have adverse effects on one's consciousness, psyche, and attitude, results in discomposure and distorted behavior. (Merki, 1996). Prolonged usage in youths makes them exhibit traits such as watery eyes and noses, becoming abnormally talkative or unusually quiet, experiencing unpredictable and short tempers, concentration lapses, loss of interest in education, increased anger and violence, high irritability or hostility to family, close friends, among others (World Health Organization, 2016).

Substance abuse results in substance addiction (American Psychological Association, 2013). Addiction refers to losing control over drug use or compulsively seeking and taking drugs despite adverse consequences (Nestler, 2001). Substance addiction (or drug addiction) is a neuropsychiatric condition characterized by a frequent craving for a drug despite its destructive effects (Goldstein & Volkow, 2002). Addiction is caused by the actions of drug abuse and generally necessitates continual drug exposure. However, how it affects a person depends on their genetic makeup and the psychological and social context in which drug usage occurs (Zhiling Zou et al., 2017). Drug addiction occurs due to long-term dependence on drugs occasioning the term 'drug dependence' (Sellner, 2018). Dependence, in this case, connotes a physical reliance on a particular thing. In context, drug dependence is a prolonged reliance on a particular drug so much that the person fails to function normally without the drug. Drug dependence is a state of psychological, mental, and physical dependence on a drug by a person on a periodic or continuous basis (Eddy, Halbach, Isbell, and Seevers, 1965). Prolonged dependence on a drug for an extended period leads to drug abuse.

In most cases, youths with substance addiction problems like Aiden above were not born that way, nor did they choose to be that way. Nevertheless, life presents harsh circumstances, somewhat unbearable. In effect, victims of substance abuse subject themselves to substances as a coping mechanism. They are victims of institutionalized violence existing in the fabric of society. For others, it becomes a pleasurable way of relaxation. With the rising cases of substance abuse among Nigerian youths, several factors are responsible as direct, indirect, and remote causes.

Causes of youths' engagement in substance abuse

Several factors are responsible for youths' engagement in substance abuse. However, this research will focus on the significant factors causing youths' engagement in substance abuse. These include the following:

1. Peer pressure: Youths aged between 15-35 function as cliques or groups and prefer to hang out and attend social functions in groups. Members of the group impact the youths positively or negatively. The impact can be harmful when they engage in social vices such as substance abuse, stealing, and kidnapping. The urge to belong and be identified as a member of a clique/group can pressure them into taking illegal substances to fit in and be bonafide members of the group. By the time they have a taste of it, they continue taking it until it graduates into substance abuse and addiction. Without medical treatment, overcoming such addiction becomes almost impossible.
2. Social Media influence: Youths are guided by what they see, read, and watch on social media. This is in line with the fact that most youths fall within the millennial and generation z stages, also called technologically dependent (Dorsey, 2015). Their addiction to social media is unparalleled, so they cannot live without it. In the same vein, certain movies, music videos, songs, and music artists promote the use and abuse of substances on social media. Seeing these on social media prompts them into substance abuse as the new normal.
3. Depression is a significant cause of substance abuse among youths. According to the American Psychiatric Association, depression is a common and serious medical illness that negatively affects one's feelings, thoughts, and actions. Depression causes sadness, and a loss of interest in activities once enjoyed. It can lead to various emotional and physical problems and a reduction in one's functional ability in the workplace and at home. However, it is treatable. (American Psychiatric Association, 2019) According to the WHO, approximately 280 million people in the world have depression, with over 700,000 people dying due to suicide every year (Institute of Health Metrics and Evaluation, 2019). Among the youths, diagnoses of major depression are rising the fastest, especially among those under age 35. As a result, diagnoses have gone up 47 percent since 2013 among millennials (ages 18–34) (Newport Academy, 2018). Plus, the rate for adolescents (ages 12–17) has risen to 63 percent since 2013—47 percent for boys and 65 percent for girls. Therefore, teen depression rates are increasing (Newport Academy, 2018). When certain things happen to someone considered very sad and disheartening, the person

starts thinking of the best way to become happy, hence the use and dependence on hard drugs resulting in substance abuse (Iqura, 2017).

3. Unemployment: Unemployment is a state of being unable to earn a living. The inability to earn a living can result in frustrations leading to substance abuse. Economic recessions may influence illegal drug use through different mechanisms. For example, increased use due to more psychological distress or decreased use due to lower incomes and purchasing power (Nagelhout et al., 2017). In this case, drug abuse may become a 'haven' and solution to forget all worries and escape the harsh realities.

4. Childhood trauma: Rape or sexual abuse by a trusted family member or stranger can lead to feelings of anxiety, depression, and suicidal thoughts, among others. The desire to forget past traumas like these may also lead to substance abuse as a coping mechanism. Thus, when a youth victim feels depressed due to a rape that occurred in the past, she may seek unconventional solutions, e.g., using substances as a temporary solution. This can easily result in substance abuse if not properly managed or controlled.

5. Low self-esteem: This is characterized by a feeling of lack of confidence in oneself. People with low self-esteem often feel unloved, awkward, incompetent, or hypersensitive (Firestone, 2018). They have a fragile sense of self-worth that others can easily wound. Furthermore, people with low self-esteem are "hyper-vigilant and hyper-alert to signs of rejection, inadequacy, and rebuff (Rosenberg & Owens, 2006). They are usually prone to making poor judgments due to their instability. A result of such poor judgment could be the use and eventual abuse of substances.

6. Poor family upbringing: In some families, children are unfortunate to have parents who are heavy and unrepentant alcoholics or substance abusers. This sets a bad example for the children at the home front and can expose them at a tender age to illegal substances. Often, it graduates to substance abuse as youths and adults. Other biological factors include family history, genetic predisposition, pre-existing psychiatric or personality disorder, a medical disorder, drug-reinforcing effects, withdrawal effects, and cravings (Vivek & Tharu, 2011).

Other causes include the need to cope with academic challenges, ignorance about the dangers inherent in drug abuse, the desire to feel popular among colleagues, and a high level of poverty and frustration (Okafor, 2020).

Consequences of substance abuse among youths

Young persons who persistently abuse substances often experience many problems, including academic struggles, health-related problems (including mental health), poor peer relationships, and involvement with the juvenile justice system. Additionally, there are consequences for family members, the community, and the entire society (Office of Juvenile Justice and Delinquency Prevention, 1998).

The consequences of substance abuse are numerous and include but are not limited to the following:

- Low self-esteem;
- destabilized future ambitions;
- community isolation (i.e., poor relationship with others);
- poor health conditions (depression);
- mental and psychological disorders;
- violence and instability;
- dropping out of school;
- poor relationship with teachers, family, and friends;
- poor academic performance, among others (National Collaborating Centre for Mental Health, UK, 2008 and Office of Juvenile Justice and Delinquency Prevention, 2008).

Legal framework on substance abuse

The control of drugs (termed narcotics and psychotropic substances) dates to the early 20th century. This was because, during this period, there was a high level of opium trade and consumption. Opium was traded during this period by the Britons as a payment method for purchased products. It was bought in India and resold to the Chinese. The trade of opium made the product very common to people and resulted in its abuse, which led to an epidemic when the consequences started to show in people's health. In 1906, about a quarter of the Chinese adult male populace was reliant on opium, the most significant drug abuse problem in history. Therefore, several countries gathered for the first time to discuss the rising consumption of drugs at the Shanghai Opium Commission in 1909 (United Nations Office on Drugs and Crime, 2022). From

the Shanghai Commission, measures were set in place under the League of Nations to control the epidemic, resulting in a 70% reduction in opium production (United Nations Office on Drugs and Crime, 2022).

There have been more cases of substance abuse than in the early 1900s. The seriousness of this problem has necessitated several countries within the United Nations coming together and making a pact in the form of appending signatures to three conventions. These conventions include

a) Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol

The 1961 Convention aims to combat drug abuse by coordinated international action. Coordinated international action, in this case, involves two forms of intervention that are to be applied simultaneously (UNODC, 2021). First, it seeks to limit the possession, use, and trade in, distribution, import, export, manufacture, and production of drugs exclusively for medical and scientific purposes. Second, it combats drug trafficking through international cooperation by deterring and discouraging drug traffickers. The 1961 Convention, expanded and strengthened by the 1972 Protocol, is considered a significant achievement in international drug control because it consolidated all previous conventions and streamlined the international drug control machinery. The 1961 Convention established strict rules on the cultivation of opium poppy, coca bush, the cannabis plant, and their products, which, in the Convention, are described as "narcotic drugs." The list of narcotics under international control is in a yellow list updated annually (International Narcotics Control Board). The Yellow List is divided into four parts detailing the lists of different narcotic drugs and their raw materials. The list contains about 136 narcotic drugs, mainly natural products, such as opium and its derivatives, morphine, codeine, and heroin, but also synthetic drugs, such as methadone and pethidine, as well as cannabis and coca leaf (International Narcotics Control Board). The International Narcotics Control Board (INCB) updates the Yellow List as new substances are scheduled under the 1961 Convention or when any information in the other parts has been updated (INCB, 2022).

In analyzing salient provisions of the Single Convention on Narcotic Drugs, Article 1(2) provides that a drug shall be regarded as consumed when it has been supplied to any person or enterprise for retail distribution, medical use, or scientific research; and "consumption" shall be construed accordingly (United Nations Single Convention on Narcotic Drugs, 1961). The import of this provision is that supply alone amounts to consumption, which buttresses the

international community's stance on drug abuse. The primary goal of international drug control in Article 4 of the 1961 Convention is to "limit ex scientific purposes the production, manufacture, exportation of, trade in, use and possession of drugs. The provisions concentrate mainly on controls of movement and trade of controlled substances to ensure no diversion of these substances into the illicit markets (Takahashi, 2009).

b) Convention on Psychotropic Substances of 1971

The Convention on Psychotropic Substances 1971 establishes an international control system for psychotropic substances (Convention on Psychotropic Substances 1971). This was a direct response to the diversification and expansion of the spectrum of drugs of abuse and introduced controls over several synthetic drugs according to their abuse potential on the one hand and their therapeutic value on the other (United Nations Office on Drugs and Crimes, 2022). Parties to the 1971 Convention are to comply with the dual aim of limiting the use of psychotropic substances for medical and scientific purposes and ensuring their availability for those purposes (International Narcotics Control Board, Convention on Psychotropic Substances of 1971). Governments of States Parties must provide statistical returns on manufacture, imports, and exports of psychotropic substances to INCB on the forms supplied for that purpose. The number of substances placed under control continues to increase. Currently, 144 psychotropic substances are controlled under the 1971 Convention. In addition, they should provide complementary information on psychotropic substances based on recommendations of the Economic and Social Council (INCB, 1971).

The Convention provides for all psychotropic substances in Schedules I, II, III, and IV and several control measures as contained in Articles 3 & 4 of the Convention. Articles 5 & 7 of the 1971 Convention provides that substances in Schedule 1 can be used for medical and scientific purposes but only when duly authorized persons have obtained permits. Article 9 provides for prescriptions and states that substances in Schedule II, III, and IV supplied or dispensed for use by individuals under medical prescription only, except when individuals may lawfully obtain, use, dispense or administer such substances in the duly authorized exercise of therapeutic or scientific functions. Additionally, parties must ensure that prescriptions are issued following sound medical practices. Article 17 provides that the Commission on Narcotic Drugs of the Council may consider all matters about the aims of the Convention and the implementation of its provisions and may make recommendations. Similarly, Article 23 permits

States Parties to adopt stricter or more severe measures of control than those provided by the Convention if, in its opinion, such measures are desirable or necessary for the protection of public health and welfare.

c) United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988

This Convention provides comprehensive measures against drug trafficking, including provisions against money laundering and the diversion of precursor chemicals. It provides for international cooperation through the extradition of drug traffickers, controlled deliveries, and transfer of proceedings (United Nations Office on Drugs and Crimes, 2022).

Legal framework on drug abuse in Nigeria

National Drug Law Enforcement Agency Act

National Drug Law Enforcement Agency Act (NDLEA Act) established the NDLEA Agency as responsible for preventing illicit cultivation, production, manufacture, trafficking, and abuse of drugs. The Act stipulates that the Agency controls illegal drug cultivation, misuse, possession, manufacturing, display, and trafficking of narcotic drugs, psychotropic substances, and chemical precursors. The Agency operates through commands in each of the 36 states and the Federal Capital Territory (FCT) Abuja (United Nations Office on Drugs and Crimes, 2018)

The NDLEA Act provides for the unlawful possession of cocaine. Thus, any person who, without lawful authority, knowingly possesses drugs popularly known as cocaine, LSD, heroin, or any other similar drugs shall be guilty of an offense and liable on conviction to imprisonment for a term not less than fifteen years and not exceeding 25 years. This is provided in Section 19 of the NDLEA Act (NDLEA, 1989). The Act further provides for offenses concerning drug abuse and penalties. Any person who, without lawful authority (the proof of which shall lie on him), engages in the production, manufacture, transportation, extraction, preparation, offering for sale, distribution, sale, cultivation, or delivery on any terms whatsoever or is in possession, conversion of property, financing, organization or management of any narcotic drug or any psychotropic substance or any property derived from narcotics commits an offense punishable with imprisonment for life or imprisonment for a term not less than fifteen years and not exceeding 25 years (NDLEA, 1989).

The Act takes any offense related to drug abuse seriously; therefore, an attempt to commit any of the offenses under the act is considered an offense. Section 23 of the NDLEA Act provides that 'where a person is charged with any of the offenses under this Act, and the evidence establishes an attempt to commit that offense, he may be convicted of having attempted to commit that offense although the attempt is not separately charged, and such person shall be punished as prescribed for the offense under this Act' (NDLEA, 1989).

Current drug policies in Nigeria and Africa have been repressive. This is characterized by the widespread marginalization and treatment of people who use drugs as criminals, hardened 'addicts,' and social outcasts, while non-violent, low-level drug offenders generally make up the largest share of those sent to the criminal justice system. This provision calls to question the repressive nature of the drug regime in Nigeria. The approach has often aggravated human rights abuses, such as ill-treatment and extortion by police, mass incarceration, and arbitrary detention, in many cases, without trial or due process (International Drug Policy Consortium, 2017). At the African Union level, the "Common African Position for the UN General Assembly Special Session (UNGASS) on the World Drug Problem" committed:

...that the fundamental goal of drug policies should be to improve the health, safety, security, and socioeconomic well-being of people by reducing drug use, drug-related harms, illicit trafficking, and associated crimes", and that... drug policies which focus entirely or disproportionately on law enforcement, incarceration, punishment, and repression have not succeeded in eradicating supply, demand, and harm caused by illicit drugs on the continent. (AU Specialized Technical Committee on Health, Population and Drug Control, 2015).

These policies have led to severe unintended consequences that often disproportionately impact the poor and marginalized while creating a rich and powerful criminal market that undermines the security of states. Therefore, the goal should strike a balance at the local, national, regional, and international levels. Drug use (must be prevented) and drug dependence must be treated and prevented at all costs, but attention must be paid to the human rights of substance abusers. People who use drugs must be offered support, treatment, and protection rather than be faced with punishment and a criminal record. This includes the provision of alternatives to arrest, sentencing and incarceration."

(AU Specialized Technical Committee on Health, Population and Drug Control, 2015). There is a need for Nigeria to sensitize the prosecutorial and judicial authorities regarding age and gender-appropriate judicial outcomes and consider court diversion and proportionality in sentencing for drug offenses, given the provisions in the UN Minimum Rules for Noncustodial Measures (the Tokyo Rules) and specifically for women with caregiving responsibilities in line with the UN Rules for the Treatment of Women Prisoners and Non-Custodial Measures for Women Offenders (Bangkok Rules) (United Nations, 2014). Minimum Standards sensitize public, religious, and political figures regarding the positive effects of implementing alternatives to punishment for drug use (African Union, 2022):

The Act sets up an agency referred to as the Nigerian Drug Law Enforcement Agency (NDLEA) under section 1 of the NDLEA Act. The agency is charged with several functions, among which include but is not limited to: the enforcement and the due administration of the provisions of the Act; the coordination of all drug laws and enforcement functions conferred on any person or authority, including Ministers in the government of the Federation, by any such law, adoption of measures to identify, trace, freeze, confiscate or seize proceeds derived from drug-related offenses or property whose value corresponds to such proceeds, among others. This is as provided in section 3 of the NDLEA Act.

On examination of the provisions of section 8 of the Act, it provides that there shall be a counseling unit. The counseling unit shall, in collaboration with the Federal Ministry of Health, have responsibility for campaigns, seminars, and workshops aimed at educating the public on the dangers of narcotic drugs and psychotropic substances, thereby stimulating interest in and awareness about drug-related problems, after-care rehabilitation, social reintegration and education of addicts and the promotion of the welfare of convicts. Nigeria's situation and increased drug abuse among Nigerian youths portray the inadequacy of the counseling unit of the NDLEA and the federal ministry of health in not controlling the narrative on the dangers of drug abuse in the country. Therefore, in line with the increased cases of substance abuse among youths, increased efforts should be made to educate the youths on the dangers of drug abuse. Furthermore, the government should set up employment programs to assist with youths' employment and help reduce institutionalized frustration.

Adopting a human rights-based approach to substance abuse

The human rights-based approach (HRBA) is a framework for the process of human development that is normatively based on international human rights standards and functionally directed at promoting and protecting human rights (United Nations Sustainable Development Group, 2022). Under the HRBA, plans, policies, and development processes are based on an organization of rights and parallel obligations established by international law, including all civil, cultural, economic, political, and social rights and the right to development. HRBA requires that core human rights principles (universality, indivisibility, equality and non-discrimination, participation, accountability) should guide United Nations development cooperation and focus on developing the capacities of both 'duty-bearers' to meet their obligations and 'rights-holders' to claim their rights (United Nations Sustainable Development Group, 2022). While there is no universal process for a human rights-based approach, United Nations agencies have nonetheless agreed with some fundamental elements in the 2003 Common Understanding on HRBA to Development Cooperation which indicates that:

- All development cooperation programs, policies, and technical assistance should further the realization of human rights as laid down in the Universal Declaration of Human Rights (UDHR) and other international human rights instruments.
- Human rights standards and principles derived from the UDHR and other international human rights instruments should guide all development cooperation, programming in all sectors, and phases of the programming process.
- Development cooperation contributes to developing the capacities of 'duty-bearers' to meet their obligations and 'rights-holders' to assert their rights (United Nations Sustainable Development Goals, 2018).

An HRBA is radically transformative because it propels institutional actions, whether in strategy formulation, decision-making, or implementation, towards the needful or obligatory dimensions of the legal or policy instruments binding upon them. It mandates a translation of legal and policy frameworks into reality in such a way that genuinely benefits the population, particularly the marginalized and vulnerable (Nnamuchi, 2018). An HRBA provides a deeper and broader understanding of substance abuse's root causes and consequences. It does so by linking a comprehensive analysis of substance abuse to a normative

framework that seeks to guarantee results and accountability for efforts in substance abuse reduction. Its added value is a more conducive enabling environment for combatting substance abuse, realizing people's rights, and empowering them to participate in decision-making (Nnamuchi, 2018). Thus, as substance abusers, the youths become the principal actors and engaged subjects of substance abuse reduction measures rather than just passive recipients.

Similarly, the HRBA is dynamic. It is flexible and can be tailored using extant human rights principles to a specific context with consideration of a complete understanding of the political, social, cultural, and legal context in which people live. Despite its flexibility, there are essential attributes that an HRBA should comprise, and they include participation, accountability, non-discrimination and equality, and empowerment. While these principles will be discussed, they will be addressed alongside the core human rights principles.

1. **Universality and indivisibility:** Every person is entitled to enjoy their human rights simply by being human (Donnelly, 2013). This universality of human rights distinguishes them from other types of rights – such as citizenship or contractual rights. The principle of universality requires that no group, especially geographically small community groups, should be left out of the reach of development assistance and public policies (Nnamuchi, 2014). Concerning substance abuse, all policies must be formulated inclusively so that all addicts will benefit from such policies. These policies must suit the peculiarities of all drug abusers, especially women. They must be gender-sensitive and encourage substance abusers to seek help. Policies and measures for combatting drug abuse must be specific to substance abuse and cut across other areas of life. A substance abuse measure must invest in the root causes of substance abuse. These include unemployment, family crisis, and poverty, among others. Thus, the government and non-governmental organizations must be invested in tackling unemployment by engaging the youth and keeping them active. It must also ensure that the youths are not living in deplorable conditions and that their socioeconomic, civil, and political rights are well catered for. This buttresses the indivisibility principle in human rights.

The indivisibility of human rights connotes that all human rights are equal, interrelated, interdependent, and interconnected (Petersmann, 2003). This means that the realization of one right is the direct realization of the other right. Civil, political, economic, and social human rights should be treated equally. The enjoyment of one right is indivisibly interrelated to the enjoyment

of other rights. For instance, enjoyment of the highest attainable health standard requires the right to freedom from substance abuse to respect, protect and promote good health. Some authors insist on the immediate protection of civil and political rights while conceding that the realization of economic, social, and cultural rights depends on resource availability. (Maastricht Guidelines On Violations Of Economic, Social, and Cultural Rights, 1997). However, all rights have resource implications, and any nation that can confidently realize these rights for its citizens must expend resources to achieve the same. By ratifying human rights conventions, states have obligations to provide material assistance and support programs for the poor, including through international cooperation.

Policies and programs should not aim at implementing one right alone. Substance abuse encroaches on a set of rights that cannot be subdivided into individual rights. These include rights to life, liberty, food, health, and employment. Any nation striving to progress in substance abuse control must promote civil, political, economic, social, and cultural rights. In buttressing the nexus, a convict incarcerated in a dysfunctional correctional facility exposed to substance abuse has his right to life infringed on. This is not just the convicts but other prisoners. Thus, it exposes them to hard substances in that facility. In the same vein, a recent graduate who, due to the frustration of unemployment and insufficient funds, cannot cater to his immediate needs may decide to switch to hard substances as an immediate solution to forget all his problems.

Thus, progress in substance abuse cannot be made if the root causes are not addressed. For example, the right to life must be guaranteed at all costs for all citizens. Prisoners in correctional facilities must be given decent incarceration conditions that promote civil and political as well as economic, social, and cultural rights. In realizing these rights, substance abuse measures implemented will be more effective because it addresses the root causes of substance abuse and nips it in the bud.

2. Equality and non-discrimination: all human rights are for everyone and must be applied equally and without discrimination. Thus, people living in poverty and social isolation, the rich and educated elites, and the middle class must realize their human rights. International law prohibits discrimination in the enjoyment of human rights on any ground, such as ethnicity, color, sex, language, religion, political or other opinions, national or social origin, property, birth, or another status. This has been espoused in several international conventions and treaties. Substance abusers must be treated equally and not

discriminated against. They can enjoy their fundamental human rights and freedoms without unjustified restrictions. Equality also requires that this category of persons within a society enjoy equal access to the necessary goods and services to fulfill basic human needs. Concerning substance abuse control measures, there must be equality of treatment for all drug abusers. Rehabilitation and medical treatment must be made readily available to all drug abusers at little or no cost, and there must be non-discrimination in accessing these services. Drug abusers who are economically disadvantaged must not be unable to access medical treatment due to their financial status. Therefore, poor youth substance abusers must have their fees augmented and subsidized to reduce costs or free medical services to access treatment. Also, in cases of reintegration into society, all abusers must be given equal opportunities in all fields. The playing ground must be leveled. It must be understood that some abusers are victims of circumstance who, due to no fault of theirs, became involved with substance abuse. Therefore, efforts must be made to bridge the seeming gaps and difficulties they will face upon successful treatment and reintegration into society.

In applying the principle of non-discrimination to substance abuse, people who use drugs are stigmatized, demonized, or ignored. As a result, human rights abuses against them (especially those committed in the name of drug control) often go unreported and unaccounted for. In 2009, the United Nations High Commissioner for Human Rights, Navi Pillay, declared that 'individuals who use drugs do not forfeit their human rights (United Nations News Centre, 2009). The criminalization of substance abusers in Nigeria and across Africa has intensified the stigma and discrimination against them, fundamentally impacting how they are perceived and treated by institutions, governments, the media, and the rest of society (International Drug Policy Consortium, 2017). Experience has repeatedly shown that criminalizing an act does not deter the commission of such acts. People do not think of certain acts' repercussions before performing them. If not, why will there be increased crime rates in Nigeria despite the criminalization of offenses?

Similarly, criminalization does not deter substance use and abuse (Degenhardt et al., 2008). In most cases, youths engage in substance abuse to fulfill a desire out of curiosity, identity, peer pressure, or frustration. The negative consequences of criminalization can be lifelong, intensifying and perpetuating existing inequalities (International Drug Policy Consortium, 2019). This is because persons who are caught abusing substances in Nigeria, in many cases, are poor voiceless persons. The significant perpetrators of substance

abuse in large amounts are the rich and influential. African governments, especially the Nigerian government, should stop demonizing people who use drugs and protect them against human rights abuses. This can be achieved through sensitization, capacity building, and education for policymakers, service providers, law enforcement and criminal justice officers, community leaders, and the media on issues related to drug use (International Drug Policy Consortium, 2017). It is essential to enable communities and networks of drug users to have their voices heard in public discourse and policy-making processes. Awareness-raising campaigns such as the 'Support, Do not Punish campaign' can be helpful in this context, especially to empower people who use drugs to have their stories told and understood in the media and by the public.

3. Participation and inclusion: An essential principle of an HRBA is that every person is entitled to participate in, contribute to, and enjoy civil, economic, social, cultural, and political development in which human rights and fundamental freedoms can be realized (Nnamuchi, 2018). Participation is not simply something desirable from the view of ownership and sustainability but rather a right with profound consequences for the design and implementation of any activity. It is concerned with access to decision-making and process implementation. It is critical to the success of any activity or measure in society (Nnamuchi, 2018).

On the other hand, inclusion connotes involvement in activities and measures by persons who are directly affected. The principles of participation and inclusion mean that all people are entitled to participate in attaining societal goals to the maximum of their potential. This, in turn, necessitates providing a supportive environment to enable people to develop and express their full potential and creativity. In the case of substance abuse among Nigerian youths, youths must be included in the decision-making and substance abuse eradication processes with their opinions sought. They must also be active implementers of the measures mapped out to combat substance abuse.

Participation in substance abuse cuts across two significant issues: decision-making and inclusion in control measures/mechanisms. For decision-making, the youths must be involved in mapping out measures that will curb the abuse of substances in schools, institutions of learning, on the streets, etc. This follows the saying, 'it is he who wears the shoes that knows where it pains the most.' The youths, mainly affected by substance abuse, will be in the correct positions to proffer functional solutions for combatting substance abuse. Therefore, as the first step towards eradicating substance abuse,

opinions of the youths must be sampled as to causes of substance abuse, areas where substances can be easily purchased, and measures they suggest can be put in place to curb substance abuse. In doing this, the identity of youths who give out such information must be protected at all costs. This can be done by making such calls anonymous to protect them from reprisal attacks from drug dealers who feel betrayed. Proper measures must be set to engage the youths' participation in these activities. Such plans can be by engaging the private sector, key ministries, academia, CSOs, religious organizations, school learners, youths, adults, and elders in planning and executing evidence-based prevention activities in an integrated partnership approach.

The next step is implementing these suggested measures and other measures following human rights principles. The implementation here must involve the youth. Therefore, they are to serve as rehabilitation workers, researchers, and caregivers, among other roles. This creates a sense of responsibility that comes with working with other youths. Also, it will be easier for youths' substance abusers to relate with their fellow youths and open up about their innermost thoughts and fears than for them to open up to persons who have not been abused in the past.

4. Tackling substance abuse as a public health concern

In treating substance abuse, it must be noted that it must be treated as a public health concern. Public health is defined as "the art and science of preventing diseases prolonging life, and promoting health through the organized efforts of society." (World Health Organization, 2012). Public health is concerned with the health of the entire population. A public health concern is an issue that affects the entire population. Substance abuse is a public health problem because it directly and indirectly, affects the entire population. In the case of direct effect, the youths who directly engage in substance abuse are affected, and their lives, generations, and achievements are cut short. For indirect effect, these youths explore all manners of unsafe and unhealthy measures in drug abuse.

A good example is sharing of syringes among youths, and poor sterilization of other equipment, among others. When youths who engage in substance abuse share syringes, it can cause transmitted infections such as HIV, hepatitis, and life-threatening allergies, among other risks. These can lead to the secondary transmission of family members and friends without awareness, thereby increasing the cases of HIV and sexually transmitted infections.

Thus, the right to health of all drug abusers must be protected and respected without discrimination and restraint. In other words, they have a right to enjoy the highest attainable physical and mental health standard without distinction of race, religion, and political belief, economic or social condition. An overly punitive approach towards people who use drugs directly undermines public health: the criminalization, mass incarceration, and stigmatization of people who use drugs around the world fuel the HIV epidemic, hepatitis transmission, tuberculosis, overdose deaths, and a range of other harms (Global Commission on Drug Policy, 2013). To compound this, many people who use drugs are unable or unwilling to access health services, treatment, and primary healthcare for fear of discrimination, abuse, or arrest or due to the cost of health and rehabilitation services, among others. Substance abuse has significant implications for the health of people who use drugs and the broader public health in Nigeria and Africa – a continent that HIV and other epidemics have hardest hit. According to United Nations data, while the global prevalence of HIV in the general population was around 0.8% in 2015 (Joint United Nations Programme on HIV and AIDS), it has reached 14% among people who inject drugs (United Nations Office on Drugs and Crime, 2016). To tackle these issues, the Nigerian government should commit to and fund the provision of evidence-based, cost-effective harm reduction approaches (International Drug Policy Consortium, 2016). Countries in Africa, such as Kenya, Tanzania, South Africa, Mauritius, Senegal, and Morocco, have adopted this approach and made progress in this regard (Harm Reduction International, 2016). This approach is referred to as the harm reduction approaches. Harm reduction approaches require the development of comprehensive and evidence-based drug dependence and treatment programs operating in line with relevant international quality standards: i.e., they should be voluntary, integrated into broader health systems, well regulated, available, and accessible to all those who need treatment (including women, young people, and other key populations). (United Nations Office on Drugs and Crimes, 2016). In addition, people who use drugs have varying and often complex needs which require a diverse range of treatment options. To ensure that a treatment system is humane and adequately responds to the users' needs, people who use drugs must be fully engaged in the design, delivery, and monitoring of these programs at the local and national levels (International Drug Policy Consortium, 2017).

Violations of the right to health will also be addressed by decriminalizing people who use drugs (Global Commission on Drug Policy, 2016). This would enable people who use drugs to access health services without fear of arrest, stigma, or discrimination. Decriminalization means that drug use remains prohibited but is no longer considered a criminal offense. Instead, it will be dealt with through non-criminal sanctions such as fines, confiscation, or community service or with no sanction but suitable referrals to drug treatment and harm reduction services (International Drug Policy Consortium, 2016). A necessary consequence of the criminalization of drugs is that it affects the global palliative care and pain management crisis. Several internationally controlled substances play a crucial role in the medical treatment of ailments and pain relief management. Access to controlled substances for medical and scientific purposes is one of the fundamental aims of the United Nations Drug Conventions (Hallam, 2015).

Nevertheless, the system is failing as 75% of the world's population lives in countries without sufficient access to essential pain-relieving and treatment drugs (Global Commission on Drug Policy, 2015). Reasons for this include fear of diversion to the illicit market, regulations required by the international drug control system and the resulting legislative and technical barriers at the national level, insufficient training of healthcare providers, and broader 'opioid-phobia' (International Drug Policy Consortium, 2016). The Nigerian government should commit to urgently reviewing national drug control regulations using available guidance to address the woefully inadequate availability of controlled medicines for pain relief and medical treatment in the region (World Health Organization, 2011). This should be accompanied by adequate training for healthcare, law enforcement, and drug control personnel to bridge existing gaps in the system. In treating substance abuse, rehabilitation and treatment measures must be implemented wherein successful youth patients are given the necessary training and reabsorbed as workers in the rehabilitation centers. This is because it is easier for drug abuse addicts to relate with former drug addicts. In such cases, they are viewed as success stories and become role models for youths battling substance abuse.

5. Accountability and the rule of law: States have the primary responsibility to create an enabling environment where all people can enjoy their human rights and must ensure that respect for human rights norms and principles is integrated into all levels of governance and policymaking (Gayathri, 2015). The principle of accountability is essential in securing an enabling environment for

development. Human rights do not simply define the needs of people but recognize people as active subjects and claimholders, thus establishing the duties and obligations of those responsible for ensuring that needs are met. Consequently, identifying duty holders must be an integral part of program development (Nnamuchi, 2018). Duty holders are persons imposed with a responsibility to execute an individual right. Duty holders in substance abuse include the youths, government, key ministries, academia, civil society organizations (CSOs), religious organizations, and churches, among others, in the planning and execution of prevention activities in a combined partnership approach. All duty-holders must be accountable and transparent to the people. Funds expended in substance abuse programs must be well accounted for to ensure trust among the citizens. In other words, the law must protect the rights of its citizens. Any disputes about substance abuse reduction measures are not to be resolved through the exercise of some arbitrary discretion but through the adjudication by competent, impartial, and independent processes. These procedures will ensure complete equality and fairness to all parties and determine the questions following clear, specific, and pre-existing laws that are known and openly proclaimed. All persons are equal before the law and are entitled to equal protection. The rule of law ensures that no one is above the law and that there will be no impunity for human rights violations.

6. Empowerment: The African Union has noted multiple causes for the continent's rise in substance abuse and drug trafficking. They include, among others, poverty, social exclusion, conflict, violence and trauma, gender inequality, high levels of income inequality, increased youth populations and youth unemployment, high rates of urbanization, low levels of criminal justice resources, mental health factors and lack of treatment opportunities, high levels of availability of drugs, lack of recreational space and recreation activities, family factors, homelessness, among others (African Union, 2019). All these boil down to empowering the youths through job creation, poverty alleviation schemes, free education, and protecting their mental health at all costs. Any approach to combat substance abuse that does not consider these is doomed to fail.

Conclusion

Adopting human rights-based approaches should be at the center of every government plan and policy implementation. Where appropriate human rights principles are applied, all humans are catered to and treated equally without

discrimination. The success of such a program is guaranteed. One may say that this is one reason why previous government policies have not addressed the issue of substance abuse among Nigerian youths but have worsened it.

The National Drug Law Enforcement Agency (NDLEA), in 2022, proposed drug tests for both new and returning students as part of measures to reduce drug use at the University of Abuja. The chairman of the NDLEA, Buba Marwa, proposed the inauguration of the War Against Drug Abuse (WADA) drug-free university campaign on Wednesday in Abuja (News Agency of Nigeria, 2022). While noticing the increased number of drug abuse cases, he encouraged the university to develop a drug policy and make the same available to each student. He also pointed out that it was essential to create an NDLEA outpost on the campus where they would deploy men to assist the school authorities and detect drug dealers and users within the university (News Agency of Nigeria, 2022). While this is a laudable approach, it breeds inequality in combatting substance abuse because this program accounts for student-abusers in universities alone. In applying the principle of a human rights-based approach, similar programs should be inaugurated on the streets (rural, urban, and slums) to cater to substance abusers who are not students. This is because many substance abusers are in educational institutions and on the streets. Also, the youths (students in the universities) must be deployed to assist the school authorities as the participation of youths will reduce substance abuse. Similarly, the NDLEA should embark on massive campaigns, movies, and videos on social media with youth celebrities as ambassadors.

In all this, it is vital to make the following recommendations:

- 1) The government should enact measures for people who sell drugs indiscriminately, and they should supervise target areas where drugs are sold daily. The youths should form part of the task force and participate in this process. Also, previous drug addicts who have received treatment and are fully recovered should form part of the task force and process. Similarly, the activities of repentant drug abusers should be monitored and tracked to prevent a relapse. Furthermore, measures should be adopted to reintegrate them into society and ensure they are not exposed to conditions that make them deal with drugs.
- 2) Social media activities should be monitored as much as possible. Most youths are on social media and emulate whatever they see there. The youths, especially millennials and generation Z, have idols in the name of celebrities,

social media influencers, content creators, etc. Some of these persons have lifestyles unworthy of emulation. Therefore, such persons should be banned from posting videos dealing with or promoting drug use, among others. Instead, the narrative on social media should be controlled with massive campaigns on the dangers of drug abuse promoted on all social media outlets. These campaigns should be spearheaded by the youth, celebrities, and social media influencers, among others. When intending youths of substance abuse are convinced that their role models are spearheading these campaigns, they will be deterred from dealing with substances, thereby reducing the rate of substance abuse.

3) Evidence-based, age-appropriate drug awareness campaigns, debates, and essay competitions for school learners should be organized to build their resilience and highlight drug facts. There is also a need for destigmatization and social inclusion of learners who have started using drugs, including involving them in sports, culture, and leisure time activities, to prevent the onset of drug use and/or delay initiation into drug use. The role of the internet is crucial in drug education (African Union Plan of Action, 2019).

4) The Ministry of Education, in conjunction with the National Campaign against Drug Abuse (NACADA), should engage in appropriate interagency agreements to streamline the provision of services to support students with social and behavioral problems emanating from drug abuse. Additionally, school syllables should be reviewed to include issues bordering on substance abuse

5) School administrators should develop, implement, and regularly review, in consultation with the school community and governing council, a school behavioral code consistent with the drug abuse policies.

6) Parents and caregivers should have access to drug abuse information, support materials, and related documents. Awareness of their rights to advocacy and avenues available to them when grievances relate to the school's management of students' behavior should be created. This makes for the possibility of early detection and exploration of possible solutions. On the other hand, teachers should develop and foster positive relationships with students and families and communicate and interact effectively with students (Okafor, 2020).

Engaging the media, community leaders, religious organizations, and other stakeholders in communicating and training in family and parental skill approaches is also valuable and cost-effective in drug use prevention and treatment.

7) A comprehensive health services package should be set up for substance abusers. Based on the recommendation of the WHO/UNAIDS/UNODC, a comprehensive package of health services for people who inject drugs, including

- needle and syringe programs,
- drug dependence treatment,
- opioid substitution therapy (OST),
- other drug dependence treatment,
- HIV testing and counseling,
- antiretroviral therapy (ART),
- prevention and treatment of sexually transmitted infections (STIs)
- condom programs for PWID and their sexual partners
- targeted information, education, and communication (IEC) for PWID and their sexual partners, diagnosis, and treatment of and vaccination for viral hepatitis
- prevention, diagnosis, and treatment of tuberculosis (TB) (United Nations Office on Drugs and Crimes, 2018).

Implementation of these recommendations must comply strictly with human rights-based principles to ensure success in combatting substance abuse.

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