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Barriers to successful treatment of substance abuse among Nigeria Youths: A systematic review

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ABSTRACT

The prevalence of substance abuse represents a major global public health concern, with Nigerian youths facing particularly unique challenges. This systematic review examines the barriers to successful treatment of substance abuse among Nigerian youths. In line with the PRISMA and MOOSE guidelines, this review included twelve studies published between January 1999 to May 2024. The key barriers identified in this review included funding shortages, uneven distribution of treatment centres, limited awareness of treatment services, poor policy and staffing and beliefs in alternative medicine. The results identified in this review highlighted structural factors such as a lack of qualified staff, absence of funding and poor policy enforcement, along with individual factors such as stigma and lack of awareness as the major factors that significantly impedes the successful treatment of substance abuse among youths in Nigeria. This review thereby highlights the need for increased funding, better policy enforcement and increased public-awareness campaigns to improve treatment outcomes for Nigerian youths. In conclusion, expanding access to treatment is contingent upon the strategic establishment, adequate staffing and proper equipping of additional mental health facilities nationwide.

Key Words: Substance abuse, Treatment barriers, Nigerian youths, Public health, Government policy

INTRODUCTION

Substance abuse is the harmful or hazardous use of psychoactive drugs and this has been a significant public health issue presenting serious challenges to the healthcare systems and social structures in the world (Uwaibi *et al.*, 2022). United Nations Office on Drugs and Crime's (UNODC) World Drug Report 2019, in 2018, stated that approximately 271 million individuals aged between 15 to 64 engaged in use of illicit drugs (UNODC, 2019). This in turn has led to rapid decline in quality of life, along with increased substance abuse related morbidity and mortality. According to Uwaibi et al. (2022), drug and alcohol abuse among the younger population is connected to various issues and challenges, which encompasses mental health and character disorders, dangerous sexual behaviour, criminal conduct, sexual assault, substance dependency, poor academic grades and strained personal connections. The UNODC report (2007) affirmed that substance abuse is a widespread issue, affecting nearly every country worldwide to different degrees (World Drug Report, 2007). According to research individuals can develop addiction to various substances, such as cocaine, cannabis, heroin, as well as legally available substances like tobacco, alcohol or prescription medications (Degenhardt *et al.*, 2008).

Nigeria, with its diverse socio-cultural landscape, encounters distinct challenges in addressing substance abuse among its youth. When compared to other developing nations, Nigeria is notable for having an extremely high-rate of consumption of harmful psychoactive substances such as cannabis, tobacco, alcohol, benzodiazepines and opioids (Degenhardt *et al.*,2008)

Empirical studies reveal that approximately 10.8% of the Nigerian population, or 10.6 million Nigerians, consumed cannabis in the previous year with the average age of first-time use being 19 years old in 2018 (UNODC, 2018). Despite the ongoing efforts by the National Drug Law Enforcement Agency (NDLEA) and various levels of the Nigerian government to tackle this issue, the prevalence of substance abuse, particularly among adolescents aged 10-25 years, has been steadily increasing. It is reported that Nigerian youth make up a significant portion of the country's population, with 45.46 percent between the ages of 15-35 years, and an estimated population of about 209.6 million people in 2021, the youth are the most vulnerable to the substance abuse challenges (National Bureau of Statistics, 2020). Although, substance abuse treatment is not a new field but it remains an evolving aspect of healthcare in Nigeria. Despite more than two decades of continued treatment efforts, there is limited knowledge regarding the specific practices employed within the country (Azuike *et al*, 2011).

The purpose of the treatment of substance abuse is to address issues arising from substance use and enhance individuals' physical, mental, psychological and social well-being. These

services encompass a wide range of interventions such as evaluations, identification of addiction-related conditions and co-occurring issues, development of treatment strategies, medication management, therapeutic counselling and various forms of support spanning medical, mental health, psychological, social and legal domains. Services also include post-treatment care and monitoring for those struggling with substance misuse. In Nigeria, however, the majority of treatment centres (82%) reported that their approach integrates traditional, cultural and religious concepts (Nkereuwem *et al.*, 2020).

Globally, it is estimated that approximately one in six individuals with substance use disorder seek treatment annually (Wang et al., 2007). However, significant geographical inequalities persist, as merely one out of every eighteen individuals with substance use disorder accesses treatment across Africa (World Drug Report, 2011). Particularly within Nigeria, only eight dedicated psychiatric facilities have the capacity to address substance addiction disorders and they are supplemented by mental health departments within university teaching hospitals, federal healthcare centres and public hospitals (Abikoye, 2015). According to the UNODC data from 2009, 50-83% of patients successfully completed their drug dependence treatment, while 0-35% left early, 0-11% dropped out and 0-20% absconded (Moses, 2010). The early termination of treatment was primarily attributed to financial difficulties and the use of illicit drugs outside treatment facilities. Despite the availability of various treatment programs aimed at combating substance abuse in Nigeria, the success rate remains inconsistent. For example, a 2020 study in Lagos state, Nigeria reported a relapse prevalence of 52.7% (Okonkwo et al., 2020). Another 2022 study in Ogun State, Nigeria found a 71% relapse rate among rehabilitated substance users, this shows that even after treatment, more than half of patients return to substance use (Ogungbesan et al., 2022). It is, therefore, paramount to identify barriers to successful treatment abuse in Nigeria. The aim of this study was to systematically review the existing literature on the successful treatment of substance abuse among youths in Nigeria and to identify barriers inhibiting the successful treatment of substance abuse in this demographic.

METHODOLOGY

The systematic review followed the guidelines set forth by the Centre for Reviews and Dissemination (CRD) for conducting healthcare reviews, adhered to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) statement, and complied with the Meta-Analysis of Observational Studies in Epidemiology (MOOSE) guidelines for reporting systematic reviews.

Inclusion criteria

This review consists of peer-reviewed articles, government reports, and gray literature from the past 25 years, with focus on studies conducted in Nigeria and participants in the age range of 15-30 years and are currently undergoing or have completed substance abuse treatment.

Articles are to be written in English language and should provide empirical data on the barriers to substance abuse treatment, using qualitative, quantitative or mixed methods study design. Studies that only examines the intervention effectiveness without detailing specific barriers were excluded. Additionally, studies were assessed by CASP checklists and Cochrane Risk Bias Tool and only studies with strong methodological rigor were included to ensure robust findings.

Exclusion criteria

The review set clear exclusion criteria. Studies published more than 25 years ago, research conducted outside Nigeria and investigations involving participants younger than 15 or older than 30 were omitted. English-language articles that presented empirical data on barriers to substance-abuse treatment was considered and papers lacking such information were excluded. Researches that focused solely on the effectiveness of an intervention without examining the specific barriers to treatment were also left out. Finally, studies that failed to meet the methodological standards of the CASP checklists or the Cochrane Risk of Bias tool were excluded to preserve the reliability and validity of the findings.

Search strategy

A comprehensive literature search was carried out across several platforms such as PubMed, African Journals Online, Google Scholar, BMC Public Health and the Cochrane Library. To capture any studies that might have been missed, the reference lists of the retrieved articles and of relevant systematic reviews were also screened. The search employed a range of keywords such as "substance abuse," "treatment of substance abuse," "barriers to substance abuse treatment," "substance abuse among youths," "substance abuse among adolescents" and "successful treatment of substance abuse." Only peer-reviewed papers published in English Language between January 1999 and May 2024 were eligible for inclusion. When essential information was absent or unclear, the corresponding authors were contacted to obtain clarification.

Data extraction

The data from each study were extracted systematically and entered into an Excel worksheet by the researcher. Entries were organized under the following headings: (a) serial number, (b) year of publication, (c) author(s), (d) title, (e) study design, (f) substanceabuse category, (g) treatment modality, (h) treatment duration, (i) reported barriers to successful treatment and (j) study conclusions. After the initial extraction, a second reviewer crosschecked the data for accuracy, added any missing details, and noted observations directly in the table.

Quality assessment

The studies included in this review were screened for quality using established tools such as the CASP (Critical Appraisal Skills Programme) checklists and the Cochrane Risk of Bias instrument. These instruments were used to verify that each study met rigorous methodological standards and to ensure that the conclusions were made on solid evidence. In sum, the systematic approach taken throughout this review involve careful selection, transparent appraisal and thorough documentation that strengthens the credibility of the findings and supports the reliability of the final conclusions.

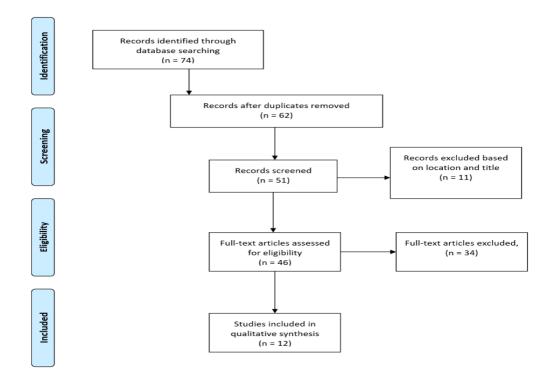


Table 1: Summary of articles used to identify the barriers to successful treatment of substance abuse among Nigeria youth.

Year	Author	Title	Study design	Substance abused	Barriers	Conclusion
2022	Ilomuanya et al	Ilomuanya et al Direct Medical Cost	A Cross-Sectional	Drug and alcohol	Drug and alcohol High financial cost	Cost is high and almost
		of Treating Substance	Study			wholly borne by the
		Use Disorders in Two				patients
		Tertiary Hospitals in				
		South-West, Nigeria: A				
		Cross-Sectional Study				
2015	Gboyega E.	Factors Affecting	A Qualitative Study Alcohol and other Poor awareness	Alcohol and other	Poor awareness	Need for Relevant
	Abikoye	the Management		psychoactive	regarding available	policies and intervention
		of Substance Use		substances	centres for managing	to target the underlying
		Disorders: evidence			substance use disorders.	socio-cultural
		from Selected Service				
		Users in Bayelsa State				
2019	Nelson and	Multiple barriers to	A Qualitative Study	Drugs (Alcohol,	A Qualitative Study Drugs (Alcohol, Key barriers to accessing	The necessity for
	Abikoye	utilization of drug		Cannabis,	drug treatment included	policy reforms and
		abuse treatment by		Orioide	inadequate service	shifts in how society
		female street sex		Opinius,	information, concerns	views sex workers,
		workers in Nigeria		Cocaine,	about financial and	alongside comprehensive
				Tranquilizers)	time costs, fear of being	human rights-oriented
					arrested by police, social	approaches.
					stigma, and lack of	
					supportive male partners.	

Year	Author	Title	Study design	Substance	Barriers	Conclusion
2019	Joseph et al.	Substance Abuse and	A Quantitative	Indian hemp,	Social and structural	Need for social work
		Treatment Among	Study	cocaine, coffee,	barriers	departments be created
		Students in an		codeine,		in all schools in Nigeria
		Institution of higher		tranquilizer,		at all level to attend to
		learning in Nigeria		inhalants, alcohol		the
				and tobacco		
				smoking		
2022	Chia and Ma-	Access to drug	A Cross-Sectional	Drugs (Cannabis,	The personnel available	The study found a high
	shika	treatment services in	Study	Opiates)	to tackle substance	prevalence of drug
		Nigeria: the challenge			addiction issues are	addiction but a small,
		of the addiction			insufficient in number	under-trained workforce,
		workforce			and lack adequate	recommending
					professional training.	the introduction of
						professional SUD
						treatment courses
						in higher education
						institutions.
2020	Abayomi O.	Factors influencing	A Qualitative study	Drugs (Heroin,	Acknowledged need	Understanding drug
	et al	treatment-seeking		cocaine,	for intervention,	users' decision-making
		behaviour among		cannabis)	affordability and funding	is crucial for enhancing
		persons with drug use			sources, attitudes	health services,
		disorders			concerning treatment and informing policymakers,	informing policymakers,
					other available options,	and promoting programs
					and perceptions of	to boost drug treatment
					healthcare quality.	uptake in Nigeria.

Year	Author	Title	Study design	Substance abused	Barriers	Conclusion
2018	Nelson E. U. E.	Alcohol consumption	Policy analysis and	Alcohol	Challenges include an	Efforts should focus
		and related problems:	recommendation- based design		inadequate number and	on codifying evidence-
		Treatment and policy	0		uneven distribution	based measures,
		responses in Nigeria			of facilities, lack of	strengthening political
					funding, insufficient	commitment, and
					skilled staff, and absence	expanding mental health
					of government policy on	facilities to improve
					treatment.	nationwide access to
						alcohol use disorder
						treatment.
2012	Ebigbo et al.	Challenges in the	A Case Study	Drugs (prescrip-	Easy access to drugs	The clients were
		Treatment of Drug		tion drugs)		motivated to quit drug
		Abuse in a Nigerian				abuse through the
		Female Health Worker:				application of the Wawa
		A Case Study Applying				technique, an aspect of
		the Wawa Technique				harmony restoration
						therapy.

Year	Author	Title	Study design	Substance abused	Barriers	Conclusion
2019	James et al.	Drug Treatment	A Quantitative	Drugs (Cannabis,	Poor facility	Cannabis leads treatment
		Presentations at a	Study	Opiates,		demand for substance
		Treatment Centre		Psychoactive		abuse, with rising pre-
		in Southern Nigeria		substances)		scription opioid abuse;
		(2015–2018): Findings				overcoming barriers
		and Implications for				is essential to improve
		Policy and Practice				access to evidence-based
						care in the South-South
						zone.
2011	Azuike R.	Substance Abuse	A Case Study	Drugs (tobacco,	The facility faced	Overall, this research
		Treatment in Nigeria:		cannabis, alcohol,	cannabis, alcohol, several challenges, with	offers valuable insights
		Case Study of a Non-		cocaine and	inadequate funding as	into substance abuse
		Profit Rehabilitation		heroin.)	the top issue, along	treatment practices in
		Centre			with managing patient	Nigeria and can guide
					misconduct and varying	future studies in simi-
					levels of family support.	lar facilities across the
						country.

Year	Author	Title	Study design	Substance abused	Barriers	Conclusion
	Abikoye et al.	Drug-use dynamics,	A Quantitative	Drugs (cocaine,	Challenges include fear	We emphasized
		treatment need	Study	Injected drugs,	of arrest, inadequate	providing treatment that
		and availability of		Polydrug use)	urbanized systems	is financially viable,
		treatment facility:			requiring long travel,	accessible, and backed
		evidence from			extended waiting times,	by scientific evidence,
		selected bunks in Uyo			high treatment costs, and	while also integrating
		metropolis in Nigeria			stigma.	drug abuse concerns
						into the healthcare
						framework.
	Onifade et al.	A descriptive survey	A Cross-Sectional	Cannabis,	Available units were	These units need to be
		of types, spread	Study		not networked and	coordinated within a
		and characteristics		Cocame, Opionas	lacked a directory or an	sustainable network
		of substance abuse			evaluation framework.	to ensure effective
		treatment centres in				supervision, adequate
		Nigeria				financial resources,
						and ongoing quality
						improvement initiatives.

RESULTS

This systematic review focused on studies that reported the barriers to successful treatment of substance abuse among Nigerian youths from January 1999 to March 2024. The initial search identified 74 studies for review. After removing the duplicates and applying the inclusion criteria, the selection was narrowed down to 12 articles. The selected articles consisted of three qualitative studies, three quantitative studies, one policy analysis and recommendation-based design, two case-control studies and three cross-sectional studies. A summary of all 12 articles is provided in Table 1. All the studies used were conducted in Nigeria. The major themes identified through the systematic review included lack of funding, inaccessibility, lack of awareness, poor policy/staffing and alternative medicine/ therapy. The major themes and subthemes are listed in Table 1.

Table 2: Identified barriers to successful treatment of substance abuse among Nigeria youth, major themes and subthemes.

Themes	Themes Lack Of Funding	Inaccessibility	Lack of Awareness	Poor Structure (Policy/ Staffing)	Alternate Medicine
Sub	Sub Lack of funding Themes (for the health sector generally)	Inadequate number and uneven spread of facilities.	Inadequate number Limited awareness of and uneven spread facilities that manage of facilities.	Insufficient trained personnel and absence Beliefs about treatment of governmental policies regarding treat- and alternative ment.	Beliefs about treatment and alternative therapies.
	Treatment cost	Having to cover long distances to get to the facility.	Shame and stigma.	There is a shortage of personnel to tackle substance addiction problems, and existing staff are inadequately trained.	
	High costs of treatment	Extended waiting Times.	Fear of arrest.	Available treatment units were not networked and lacked a directory or an evaluation framework.	
			Inadequate information on services.		

Fig 1: Distribution barriers to successful treatment of substance abuse among Nigeria youth, major themes

Fig 1 illustrates the distribution of barriers to successful substance abuse treatment among Nigerian youth: Lack of Funding at 26%, Accessibility at 18%, Awareness at 13%, Structure (Policy/Staffing) at 39%, and Alternative Medicine at 4%. This indicates that Structure (Policy/Staffing) is the most significant barrier.

DISCUSSION

This review aimed to identify and categorize the barriers to successful substance abuse treatment in Nigeria. To our knowledge, this is the first systematic review specifically addressing the challenges Nigerian youths face in accessing and completing treatment. Each study reviewed presented unique arguments and justifications with no conflicting findings.

Abikoye et al. (2021) identified several barriers to the successful treatment of substance abuse which includes fear of arrest, inadequate and urbanized systems requiring long travel distances to facilities, extended waiting times, high treatment costs, associated shame and stigma. Similarly, this review identified six studies such as Ilomuanya et al. (2022); Nelson & Abikoye (2019); Abayomi et al. (2020); Nelson (2018); Azuike (2011); Abikoye et al. (2021) that emphasized on treatment costs and lack of funding as significant barriers to substance abuse treatment among Nigerian youths. Additionally, nine studies such as Joseph et al. (2019); Chia & Mashika (2022); Nelson (2018); James et al. (2019); Azuike (2011); Abikoye et al. (2021); Onifade et al. (2011); Abayomi et al. (2020); Abikoye (2015) that highlighted structural issues such as an insufficient number of facilities, uneven distribution of facilities, shortage of qualified staff, lack of clear government policy guiding treatment, lack of networking among available treatment units, absence of a directory or evaluation system, long travel distances to facilities and extended waiting times as major barriers to substance abuse treatment. Furthermore, stigma, fear of arrest and shame associated with being identified as a substance abuser are among major barriers to substance abuse treatment (Nelson & Abikoye, 2019). Other studies such as Nelson & Abikoye (2019) and Abikoye (2015) reported that patients do not know which treatment services exist or where to find them and these further limits their ability to access to care.

This review, in line with Farhoudian *et al.* (2022) highlighted individual and structural factors as the predominant barriers of substance abuse treatment. Structural barriers encompass a lack of funding, accessibility, awareness, policies, staffing and a dependence on alternative medicine or therapy. More specifically the structural barriers include insufficient skilled staff, the absence of government treatment policies, inadequate health sector funding, high treatment costs, a small and undertrained workforce, fragmented treatment

units which lacks directories or evaluation frameworks, an inadequate number and uneven distribution of facilities, need for long travel distances to facilities and prolonged waiting times (Nelson, 2018).

The National Health Insurance Scheme in Nigeria has had a limited impact on the treatment of individuals with substance abuse issues. In Nigeria, two-thirds to three-quarters of those seeking treatment for substance abuse are unemployed, which prevents them from accessing health insurance funding. Similarly, a 2018 national survey in Nigeria identified the unaffordable cost of treatment as the primary obstacle for drug users (Abayomi *et al.*, 2020). The high treatment costs, often paid out of pocket along with indirect costs such as lost time and income, adversely affect academic pursuits, productivity and relationships.

The individual factors identified from six articles such as Ebigbo *et al.* (2012); Nelson & Abikoye (2019); Abikoye (2015); Abayomi *et al.* (2020); Azuike (2011); Abikoye *et al.* (2021) include lack of awareness and a belief in alternative medicine. Barriers highlighted include poor knowledge of substance use disorder management facilities, insufficient information on available services, beliefs about treatment and a preference for alternative therapies. Furthermore, the perceived quality of care can influence the duration drug users stay in treatment (Abayomi *et al.*, 2020).

The social factors identified in six articles such as Ebigbo *et al.* (2012); Nelson & Abikoye (2019); Joseph *et al.* (2019); Abayomi *et al.* (2020); Azuike (2011); Abikoye *et al.* (2021) include shame, stigma, fear of arrest and either deficient or excessive family support. In line with this review, Choi et al. (2022) highlighted the fear of incarceration and stigma as major treatment barriers for pregnant women and mothers with substance use disorders (SUD). Social sanctions are also known to be associated with female drug use which can prevent female drug abusers from seeking help or accessing necessary treatment. Similarly, Abayomi *et al.* (2020) stated that female substance abusers tend to delay or avoid seeking treatment for other health conditions because of shame and embarrassment associated with substance abuse. Smith and Marshall's (2007) study demonstrated how deeply internalized the perceptions of other beliefs can create a self-fulfilling prophecy acting as a barrier to treatment and causing a perpetual cycle of drug use. Additionally, easy access to illicit drugs contributes to the factors continually obstructing treatment success. In rural areas, limited public transportation and the distance from treatment facilities make treatment access particularly challenging (Pullen & Oser, 2014).

This study also revealed that the most common barriers to substance abuse treatment included the belief that treatment was not essential or wanting to quit independently, absence of motivation, privacy concerns, shame or social discrimination, absence of supportive relationships, child custody ramifications, inadequate treatment capacity, delays in access and

waiting periods, funding and affordability issues, services that do not meet the needs of women and mentally ill persons and prejudice among healthcare workers (Abayomi et al., 2020).

Finally, this review reported the barriers youths face when they try to access or even complete substance abuse treatment. Although there are various individual and social barriers that affect youths' treatment outcomes, it is necessary for stakeholders to enforce laws and regulation to mitigate the structural barriers youth might encounter by creating, staffing and equipping more mental health facilities across the country. The government should encourage the intensification of awareness campaigns in other to reduce stigma, social sanction and also to provide support for substance abusers the need treatment and rehabilitation. It is also recommended that future research should be conducted to address existing gap regarding the treatment of substance abuse in Nigeria. Research to be conducted should also investigate the treatment implementation process for tracking treatment outcomes.

CONCLUSION

This systematic review provides a comprehensive analysis of the factors that obstruct the successful treatment of substance abuse among youths in Nigeria, this review identifies the significant challenges youths encounter in accessing and successfully completing treatment. The result of the analysis conducted in this review identified major gaps in quality, accessibility and availability of substance abuse treatment services and facilities in Nigeria. These findings underscore structural and policy issues as the key barriers affecting the treatment of youth with substance abuse disorder in Nigeria. It is necessary for the government to address these structural issues appropriately so as to improve the accessibility of treatment facilities and to enhance quality of treatment services thereby improving treatment outcomes of youth with substance use disorder in Nigeria. Another key finding derived from this study is based on individual perception, that is, lack of awareness and fear of stigmatisation are also factors that prohibits youths from seeking treatment or even completing treatment. In order to mitigate these barriers, it is imperative that stakeholders prioritize the enforcement of robust laws and regulations to stabilize and standardize treatment facilities. Furthermore, expanding the access to care facilities is essential and requires the strategic establishment, staffing and adequate resourcing of additional mental health facilities across the country. Additionally, advocacy and campaign programmes should be promoted as a way of increasing awareness about the importance of substance abuse treatment and reducing the stigmatization that comes with it.

In summary, this systematic review provides insights into treatment barriers for substance abuse in Nigeria, although there are certain limitations that affected the conclusion of this review such as the low availability of studies that monitored treatment outcomes, low quality studies and studies with weak methodology. Therefore, future research should be conducted on the implementation process of substance abuse treatment by using longitudinal study designs to track treatment outcomes of patients. Furthermore, stakeholders should utilise such studies to make informed policy adjustment and practical interventions so as to improve treatment programs and enhance the successful treatment of substance abuse among Nigerian youths.

CONFLICTS OF INTEREST

There are no conflicts of interest

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