POLICY BRIEF

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Tackling Substance Abuse among Nigerian Youth: Issues for Legislative Intervention

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Executive Summary

Nigeria, Africa's most resource-rich nation, boasts abundant human and natural assets. Its youth represent one of its greatest strengths, yet substance abuse has surged into a profound public health, social, and economic crisis. This menace affects millions, undermining youth productivity, national security, and economic growth. NDLEA and UNODC data reveal that 14–15 million Nigerians aged 15–64 years use psychoactive substances, with cannabis, opioids, and codeine-based cough syrups most prevalent. Despite government initiatives in enforcement, rehabilitation, and awareness campaigns, substance abuse among youth persists alarmingly, demanding urgent legislative action. In view of this, the following recommendations are proposed:

- Establishment of a National Digital Drug Surveillance Framework empowering NDLEA to monitor online drug markets using AI, collaborate with telecom and financial institutions, and implement real-time early-warning systems and strengthen preventive capabilities while embedding data-protection and judicial oversight safeguards.
- National Assembly may consider enacting laws that mandate nationwide integration of proven curricula, such as Life Skills Training, into secondary and tertiary institutions, including compulsory drug education and integrity testing to expand the Ministry of Education's 2025 policy for uniform implementation.
- Legislators may wish to enact legislation establishing formal collaborations among NDLEA, Ministries of Education, Health, Youth, and police to form joint task forces, for seamless prevention and response coordination on drug abuse.

1. Introduction

Drug abuse constitutes a pressing global challenge, impacting approximately 6% of individuals aged 15-64 (around 316 million past-year users in 2023, excluding alcohol and tobacco), with cannabis as the most prevalent substance (244 million users, 4.7%), followed by opioids (61 million, 1.2%) and amphetamines (30.7 million). Cough syrups, often codeine-based, are subsumed under pharmaceutical opioids or non-medical prescription misuse, fueling concerns amid synthetic opioid surges[1].

[1] https://www.ecofinagency.com/news-services/1012-51290-nigeria-unveils-national-plan-to-tackle-drug-useamong-students

In Africa, prevalence exceeds global norms at 9-10%, driven by cannabis (10% past-year use, double the worldwide rate, particularly in West/Central and Southern regions), opioids (1.2%+ in West/Central Africa, including tramadol and heroin), and codeine products prominent in treatment and seizures (Africa accounting for 57% of global pharmaceutical opioid intercepts from 2019-2023).

In Nigeria, this crisis has intensified into a profound socio-economic and public health emergency, affecting 14.4% of those aged 15-64 (14.3 million users per the 2018 NDLEA/UNODC survey, with trends holding steady into 2025), far surpassing global and continental averages[2]. Cannabis dominates (10.6-10.8 million users, 10-14%), trailed by opioids (4.6 million, 5-7%, largely prescription-based like tramadol) and codeine cough syrups (2.4 million, 2%), once a mere transit hub but now grappling with internal demand fueled by youth vulnerability, porous borders, and weak prevention[3].

2. Issues

Despite government initiatives in enforcement, rehabilitation, and awareness campaigns, substance abuse among youth persist, substance abuse among Nigerian youth (aged 15-24) manifests in alarmingly high prevalence rates of 14.4% nationally triple the global average of 6% with cannabis dominating at 10-14% (10.6 million users), followed by opioids at 5-7% (4.6 million), and codeine-based cough syrups at 2% (2.4 million)[4].These are propelled by easy access through porous borders and trafficking surges, as Nigeria transitions from a mere transit hub to a burgeoning consumer market, alongside socioeconomic drivers such as urban poverty, rampant unemployment, and high numbers of out-of-school children, particularly in northern states[5]. This threat exacerbates Nigeria's ongoing insecurity challenges including kidnapping, banditry, Boko Haram insurgency, militancy, and farmer-herder conflicts which have devastated the economic and social lives of millions of youth.

Effects of Substance Abuse among Nigerian Youth

i. **Mental and Health Disorder:** Substance abuse among Nigerian youth triggers severe psychiatric conditions, with up to 82.5% of boys in correctional facilities displaying anxiety, depression, psychosis, and disruptive behaviors directly linked to substance use, alongside 15.8%

[2] National Drug Control Mater Plan (NDCMP) 2021-2025https://www.unodc.org/conig/uploads/documents/NDCMP_2021-2025.pdf

[3] Abeku T. (2024). 14 million Nigerians risk mental health disorders due to substance abuse. https://guardian.ng/features/health/14m-nigerians-risk-mental-health-disorders-over-substance-abuse/?utm_source

[4] https://www.unodc.org/conig/uploads/documents/Drug_Use_Survey_Nigeria_2019_BOOK.pdf

[5] https://guardian.ng/features/health/nigeria-risks-losing-youth-generation-to-drug-abuse-mental-health-crisis/

diagnosed with substance use disorders.

ii. **Brain and Organ Damage:** Chronic consumption of cannabis, opioids, and codeine leads to profound cognitive deficits, liver/kidney failure, and elevated risks of sudden death or irreversible insanity, undermining neurological development in this critical age group.

iii. **Infectious Diseases:** Non-sterile intravenous use of opioids and tramadol accelerates HIV, hepatitis, and tuberculosis transmission, overwhelming healthcare systems as one-in-five affected youth requires emergency intervention for co-morbidities.

iv. **Lost Productivity and Education:** Addiction drives sharp rises in school dropouts, crippling human capital formation in Nigeria's youth-heavy economy, where over 70% of the population is under 30.

v. **Crime and Insecurity:** Approximately 40% of youth-related violence stems from drug influence, intensifying banditry, cultism, and insurgencies (e.g., Boko Haram's reliance on tramadol), alongside ₦500 billion in annual illicit seizures.

vi. **Family and Economic Strain:** Substance abuse fractures families through emotional turmoil and financial depletion, deepening poverty and unemployment cycles among at-risk urban and rural youth.

vii. **National Development Barriers:** By fostering crime syndicates and a "lost generation," drug abuse precipitates broader economic instability, thwarting progress toward Sustainable Development Goals.

Cross-Country Comparison

The United States implements evidence-based school programs (e.g., evolutions of CDC's DARE and Life Skills Training), family therapy, community coalitions, mentorship initiatives, and substantial early screening/treatment funding (over $1.7 billion annually via the Office of National Drug Control Policy, ONDCP).

Canada adopts the Youth Substance Use Prevention Program, featuring local grants for coalitions, biennial Youth Provincial Substance Use Surveys (YPSS), the Integrated Prevention Model (IPM), peer-led initiatives, and knowledge exchange hubs.

The United Kingdom utilizes the National Drug Strategy through school-based resilience education, multi-agency partnerships (spanning health, education, and police), integration of harm reduction, and a focus on building confidence rather than abstinence-only models.

India enacts the Narcotic Drugs and Psychotropic Substances (NDPS) Act alongside the Nasha Mukt Bharat Abhiyaan, emphasizing on awareness campaigns, counseling and rehabilitation centers, training for teachers, police, and vocational skills programs for recovery.

South Africa promotes Teenage against Drug Abuse (TADA) school clubs, peer education, police-led searches, Life Skills curriculum

integration, and provincial awareness campaigns.

Ghana utilizes the Ghana against Drugs framework, incorporating campus surveillance, peer mentorship, rehabilitation centers, curriculum reforms, and multi-ministerial task forces.

Indonesia adopts out youth and student programs featuring social media advocacy, stakeholder collaborations, community education, and policy reforms prioritized through the ASEAN Health Priority (AHP) framework.

Lessons

Nigeria can draw valuable lessons from these international models by prioritizing evidence-based school programs and life skills curricula to build youth resilience beyond abstinence-only approaches. Integrating multi-agency partnerships across health, education, police, and communities for coordinated action, bolstering peer-led initiatives, mentorship, family strengthening, and digital/social media campaigns tailored to local contexts like urban slums or campuses. Securing sustained funding for early screening, rehab centers, and vocational recovery, and conducting regular surveys alongside teacher/police training to monitor progress and adapt policies effectively.

3. Areas of Legislative Intervention

Addressing this cataclysm will be guided by the following proposed recommendations among others:

- The National Assembly May, through the Committees on Drugs and Narcotics, enact legislation establishing a National Digital Drug Surveillance and Early-Warning Framework. The law should empower NDLEA to deploy AI-supported digital monitoring of online drug markets and mandate collaboration with telecom and financial institutions for pattern-based detection of drug-related activities. This reform will modernize Nigeria's drug control system by shifting it from reactive enforcement to predictive prevention.
- The National Assembly, through the Committees on Drugs and Narcotics, Communications, and Trade & Investment, may enact legislation imposing Mandatory Corporate Responsibility for Drug Prevention. The law would require social media companies, entertainment industries, and logistics firms to implement compliance standards to prevent the promotion, glamorization, or facilitation of illegal drugs. These committees may oversee regulatory monitoring, enforcement of penalties, and ensure due process and data-protection safeguards.
- National Assembly may wish to enact laws that mandate nationwide integration of proven curricula, such as Life Skills Training, into secondary and tertiary institutions, including compulsory drug education and integrity testing to expand the Ministry of Education's 2025 policy for uniform implementation.
- Legislators may wish to enact legislation establishing formal collaborations among NDLEA, Ministries of Education, Health, Youth, and police to form joint task forces, for seamless prevention and response coordination on the drug abuse.
- Legislators may consider creating a national framework for school clubs, mentorship programs, family therapy,

and community safe spaces in high-risk areas supported by grants to promote grassroots ownership.

- NASS may require biennial youth substance use surveys (similar to Canada's YPSS) and real-time NDLEA-led data dashboards, backed by legislative penalties for non-compliance, to monitor trends and assess intervention efficacy.
- NASS may wish to introduce bills mandating drug awareness, counseling, and harm reduction training, prioritizing resilience over abstinence-only approaches embedded in teacher certification, police protocols, and youth-targeted digital campaigns.

Conclusion

Drug abuse in Nigeria poses serious health, social, and economic challenges, with existing interventions proving insufficient. Legislative action is urgently needed to modernize the country's response. Nigeria's National Assembly holds the pivotal role in transforming the tide against youth drug abuse through targeted legislative interventions that blend global best practices such as evidence-based curricula, multi-agency coordination, sustained funding, peer initiatives, rigorous monitoring, and capacity-building with the nation's evolving frameworks like the 2025 school drug policy and NDLEA enhancements, Implementing Digital Drug Surveillance, Health-Justice Diversion for Non-Violent Users, and Mandatory Corporate Responsibility will shift drug control from reactive enforcement to preventive. By enacting these measures, lawmakers can foster resilient youth, reduce prevalence rates, and build safer communities, ultimately securing a healthier future where prevention triumphs over pervasive substance threats.

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