



COMPARATIVE EFFICACY OF TWO COUNSELLING STRATEGIES IN THE MANAGEMENT OF ADOLESCENTS' INCLINED TO DRUG ABUSE IN BENIN METROPOLIS, NIGERIA

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Abstract

This study examined the comparative efficacy of two counselling strategies in the management of adolescents' inclined to drug abuse in Benin Metropolis, Nigeria. Two hypotheses were tested in the study. The study employed a pretest, post-test and control group randomized design. 500 senior secondary school students were sampled from the entire population of 2,496 senior secondary school students in Benin Land of Edo State. A questionnaire titled: Drug Use Questionnaire (DUQ) was used. Research question one was analysed using simple frequency counts, simple percentages, mean and standard deviations and Analysis of Variance (ANOVA) was used to test the hypotheses. The findings revealed that adolescents in Benin Metropolis was inclined to abuse drugs; there was difference between the two counselling strategies of Cognitive Behaviour Therapy and Motivational Enhancement Therapy and the Control Group in the management of adolescents inclined to drug abuse in Benin Metropolis and there was no significant difference between male and female adolescents using the two counselling strategies of CBT and MET in Benin Metropolis of Edo State, this clearly indicated that both treatments were not sex biased. Based on the findings of the study, the researchers recommends among others that counsellors posted to schools should be allowed to practice full time counselling so as to have more time for the students and carry out practical training skills on drug use and abuse on regular basis.

Introduction

Adolescence refers to the period of human growth that occurs between childhood and adulthood. Adolescence begins at around age 10 and ends around age 21. Adolescence can be broken into three stages: early adolescence, middle adolescence, and late adolescence. Each stage has its own characteristics. The most commonly used chronologic definition of adolescence includes the ages of 10-18, but may incorporate a span of 9 to 26 years depending on the source (APA, 2002).

Drug is any substance that, when taken, has the ability to change the way a person thinks, feels, sees or behaves. Substance, is however, defined as any drug not prescribed by a doctor, which is used to alter the state of consciousness or the central nervous system; such as coffee, pito, burukutu, ogogoro, alcohol, beer, bang, inhalant, tobacco, cannabis sativa or marijuana, benzodiazepines (valium), cocaine, crack, heroin, khat, ecstasy, LSD, amphetamines, solvents, gas/glues, insecticide, among others. Drug abuse is otherwise referred to as substance abuse which amounts to self-medication and self-administration of chemical substances by adolescents which they obtained through illegal means and which modified their behaviours. Drug addiction is a continued use of drug over a prolonged period of time which often leads to drug tolerance-physiological reaction in which the body requires larger and larger doses in order to experience the same effects.

However, the abuse of some drugs affects the Central Nervous System (CNS), which produces changes in mood, levels of awareness or perceptions and sensations. Most of these drugs also alter systems other than the Central Nervous System (CNS) such as state of consciousness. Some drugs appear to be more likely to lead to uncontrolled use than others (Jaffe, 2005). For instance, the National Centre for Education and Training on Addiction (NCETA 2004) sees psycho-active drugs as the one that interact with the CNS affecting



mental processes and behavior, perceptions of reality, and level of alertness, response time, and perception of the world.

It is perceived that drug abuse is as old as human existence. Many adolescents have been known to use drugs at the instance of peers, elders, siblings or significant others. Adolescents, most especially Senior Secondary School Students, tend to see the drug user as one who is tough, bold and "mean". Invariably, those who use drugs or smoke them see themselves as possessing the characteristics of being tough, bold and mean which they guard very jealously. Drugs when abused, on the other hand, are known to reduce appetite, increase heartbeat, raise blood pressure, induce restlessness, increase susceptibility to infection and promote unusual delusion. Despite all these grave effects, drug abuse is tremendously on the increase worldwide. **Gatins & White (2006)** and **Jaffe (2005)** have opined that students who usually feel inadequate use drugs to achieve social acceptance. **Mba (2008)** established that Nigerian Senior Secondary School Students under the influence of Indian hemp shed all inhibitions and produce behaviour that is inconsistent with school discipline. He also went further to observe that the increasing incidence of drug abuse among Senior Secondary School Students is a contributory factor in the ugly confrontation between school administration and students.

Drug and alcohol use during adolescence is almost a social experience and a learned behaviour (Swaid, 2008). Drug abuse is a serious public health problem that affects almost every community and family in some way. Each year drug abuse causes millions of serious illnesses or injuries among Americans. Drug abuse has been found to lead to trying out of new experiences which plays a role in many major social problems with dire consequences for adolescents and society such as drug addiction, sexual harassments, sending unwarranted messages and pictures, "sexting" e.g. nude messages to one's partner's through electronic media, violence, stress, and child abuse. Drug abuse can lead to homelessness, crime, and missed work or problems with keeping a job. It harms unborn babies and destroys families. Substance abuse therefore is a critical problem across the globe. In the United States for instance, substance abuse is one of the most prevalent mind disorders, the number one prison problem and one of the number one greatest continuing health problems. **Sales (2006)**, stated that a significant number of the United States population having substance abuse problems is indicated by approximately 6% abusing illegal drugs, 12% having problems with drinking, 25% being addicted to nicotine and, conservatively, 10% addicted to prescription medications.

In Nigeria, the incidence of drug abuse has been on the increase, and is affecting both social and emotional states of the citizenry. For instance, **Okoza, Aluede, Fajolu and Oikhu (2009)** reported in a survey of Senior Secondary School Students in Ilorin, Kwara State found that 12% were currently using alcohol. In Jos; a lifetime consumption of alcohol among out-of-school adolescents aged 11 to 20 was 38.7% of the respondents. **Egbochuku (1997)** reiterated that in recent times there has been an upsurge of incidents of drug abuse and traffickers as evidenced in the number of young people admitted into psychiatric hospitals, mental homes and prisons through the country. She added that drug abuser is one of the serious evils of our age and there has been a tremendous increase in drug abuse among young people throughout the world.

Okoza, Aluede, Fajolu & Okhiku (2009) found differences between both male and female. While 35.02% of male students abuse alcohol, 31.4% of female students abuse the same substance. 16% of male students use kolanut compared to 9% of female students, while 24% of male students use marijuana compared to 20% of female students. Librium is used by 11.8% of male students compared to 9.4% of female students and valium is used by 21.7% of male compared to 11.1% of females, and 14.7% of males use dexamphetamine compared to 3% of females. Reactivan is used by 6% of males compared to 1% of females, and 20.8% of males use mandrax compared to 10.4% of females, while 11.8% of males use

Chinese capsule compared to 8.9% of females and 14.4% of males use cocaine compared to 1.7% of female students. None of both sexes use LSD. The finding of this study is in agreement with those of **Fatoye and Morakinyo (1997)**, **Eke (1997)**, **Obot, et al (2001)**, and **Eneh and Stanley (2004)** that found differences between male and female students in their abuse of drugs.

It is observed from literature that, the rate of drug abuse is on the increase and consequences are enormous. The abuse of drugs or substance could result to permanent physical and social dependence, accidents, violent behavior, contravention of National and International laws, destruction of destinies even death of the abusers. Drug abuse has wasted talents and destinies of sport stars.

Odumodu (1999) reported that a super star used cocaine for the first time, he collapsed and died. Therefore, it is imperative that an urgent action to curtail its consumption, manage and prevent drug abuse effectively is needed in order to have a meaningful and well-behaved adolescent population who are the nation's leaders of tomorrow.



There are many reasons why individuals may abuse drugs, and these vary from person to person. However, some common reasons are likely to be escapism, the belief that drugs can solve problems, peer pressure, need to experiment, enjoyment of the effects, and easy access to socially acceptable drugs such as alcohol and tobacco (Ikhine 2012). Some evidence also suggests there is a genetic tendency to addiction; however, addictions are also common where there is no genetic predisposition (Orubu, 1997). Whatever adduces for the reasons or causes of drug abuse, all indications point to the fact that the consequences of drug abuse among students and the entire society must not be overlooked. Therefore, there is the need to develop strategies which can prevent or reduce this social menace called drug abuse, as well as, manage the victims of drug abuse among the Senior Secondary School Students.

Management of drug abuse among adolescents especially Senior Secondary School Students can be tackled using the area of counselling interventions. Some Counselling strategies have proven to be effective in dealing with or tackling drug abuse problem, therefore this study seeks to explore two out of these intervention strategies to identify the differential efficacy, if any, of the strategies. More so, Counsellors need to use interventions/strategies, which are effective and designed to help students acquire the knowledge, attitudes, and skills for functioning more effectively in the school community, at home and in the society. These strategies/interventions may enable the students to deal with problems that have already surfaced in their lives. More so, counselling interventions and many other programmes may be useful when problem behaviours get to the peak during adolescence.

It is observed that the consequences of drug abuse could be toxic; hence, there is the need for the victims of drug abuse to be assisted to deal with the feelings, thoughts and experiences. Therefore, a variety of counselling strategies/interventions have emerged to address the issue of drug abuse for adolescents. Among these counselling strategies for drug abuse management are the; Cognitive Behaviour Therapy (CBT), Motivational Enhancement Therapy (MET).

The Cognitive Behavioural Therapy (CBT) is a form of talking therapy that combines cognitive therapy and behaviour therapy. The primary focus of this treatment approach is to suggest changes in thinking that will lead to changes in behaviour, thereby alleviating or improving symptoms. The therapy emphasizes changing irrational thinking patterns that cause emotional distress into thoughts that are more reasonable and rational. CBT may focus on what is going on in the present rather than the past. However, the therapy may also look at the client's past and how this past experiences impact on how he/she interprets the world now. CBT has been used to decrease psychological distress and improve quality of life in symptomatic HIV patients (Molassiotis, Callaghan, Twinn, Lam, Chung & Li, 2002).

Motivational Enhancement Therapy (MET) seeks to evoke from clients their own motivation for change and to consolidate a personal decision and plan for change. The approach is largely client centered, although planned and directed. As applied to drug abuse, MET seeks to alter the harmful use of drugs. Because each client sets his/her own goals, no absolute goal is imposed through MET, although counsellors may advise specific goals such as complete abstinence. A broader range of life goals may be explored as well. MET is based on principles of cognitive and social psychology. The counsellor seeks to develop a discrepancy in the client's perceptions between current behavior and significant personal goals.

Defining and including control groups as opposed to comparison groups (Borkovec, 1990) also presents a dilemma in comparative psychosocial treatment research. While there is no "perfect" design in such research, there are more or less perfect designs depending upon the research question we are asking. Other methodological and statistical issues, such as those dealing with therapist/counsellor variance (Crits-Christoph et al., 1990) and choosing appropriate outcome measures (Lambert, 1990) are also important considerations and have been discussed at length elsewhere (Onken and Blaine, 1990).

Statement of the Study

The rate of drug use and abuse among adolescents in Nigeria is becoming scary, and the incidence and prevalence of drug abuse is in one way or the other affecting individual, organizations, economy and the society at large (Mba, 2008). Apart from the fact that drug abuse can lead to sharp decline in students' academic achievement, it could also lead to increased truancy, dropout rate, expulsion of students, among others. The effect of drug abuse is also more pronounced in the areas of stealing, fighting, gambling, corruption, violence and crime increase. Problems related to drug abuse among young and old adolescents in developing countries are often linked to adverse socio-economic factors. Drug abuse by school children, anywhere in the world, has adverse effects on their physical, mental, emotional, social and spiritual health



(Council of Smoking, Alcohol and Drug Dependence (COSAID), 2001).

Due to the fact that drug abuse and addiction have so many dimensions and can disrupt so many aspects of an individual's life, it is difficult to treat. Some people are able to use certain drugs without ever experiencing negative consequences or addiction. It is observed among others that, drug use can cause problems at work, home, school, and in relationships, leaving the victims feeling isolated, helpless and even cause crisis. As perceived, risk of drug abuse also increases greatly during times of transition from young adolescence to old adolescence.

Young adolescents have always had stress in their lives, but the number of students who are experiencing this stress with fear or who cannot cope with the challenges posed by drug use seems to be escalating at an alarming rate (Smith, 2010). Therefore, young people need effective counselling strategies, which will help them to cope with stress resulting from the use of drugs and its consequences. Many studies have been carried out in the area of drug use, abuse and substance addiction among adolescents in Nigeria.

However, it is not in the researchers' knowledge, that any study had been examined in this area of interest. This study is therefore embarked upon to fill the above gap and to provide the most effective strategies that counsellors can employ in dealing with drug problems and its management by:

- 1) Determine whether or not adolescents in Benin Metropolis are inclined to abuse drugs
- 2) Find out whether or not there is any difference between the two counselling strategies of Cognitive Behavior Therapy and Motivational Enhancement Therapy and the Control Group in the management of adolescents inclined to drug abuse in Benin Metropolis.
- 3) Ascertain if there is any difference in the interaction effect between male and female adolescents inclined to drug abuse managed using the two counselling strategies CBT and MET.

Research Questions

The following research questions guided the study:

1. Do adolescents in Benin Metropolis inclined to abuse drugs?
2. Is there any difference in the management of adolescents diagnosed using the two Counselling Strategies of Cognitive Behaviour Therapy and Motivational Enhancement Therapy and the Control Group?
3. Is there any difference in the interaction effect between male and female adolescents managed using the two Counselling Strategies (CBT and MET) in Benin Metropolis?

Research Hypotheses

The following research hypotheses were formulated and tested in the study:

1. There is no significant difference in the efficacies of CBT, MET and the control as regards the management of adolescents inclined to drug abuse.
2. There is no significant difference between male and female adolescents using the two counselling strategies of CBT and MET.

Methods

This research employed a pretest, post-test and control group randomized design (Campbell & Stanley 2006). This means that the entire students were pre-tested with a set of Instrument of Drug Use Questionnaire (DUQ). At the end of the treatment, the questionnaire was re-administrated as immediate post-test. The pre-test served as base line upon which the effect of treatment was determined after post-test.

The population of this study was made up of students in all the public co-educational secondary schools in Benin metropolis for 2016/2017 academic session. Only three schools Ihogbe, Oba Akenzua II and Oba Eware which were highly populated with modern infrastructure, students in the three schools were well known with behavioural problems and this made them of particular interest for the study. It helped to identify the students inclined to drug abuse and treat them with two counselling strategies of Cognitive Behavioral Therapy and Motivational Enhancement Therapy. The three schools consist of 1,034 SSI, 1,112 SSII and 350 SSIII as obtained from provisional data of the Ministry of Education Benin City, 2016. Simple random sampling technique was adopted to select five percent (5%) of the total number of 2,496 students in the three schools. This gave a total of 206 SSI, 222 SSII and 70 SSIII students (an overall sample of \cong 500 participants) were drawn from the population.



The instrument used for the collection of data was a set of questionnaire titled “Drug Use Questionnaire”. Originally, the DUQ was titled “Drug Abuse Questionnaire (DAQ)” by Sobriety (2007) but for the purpose of this study, the questionnaire was modified to suit the study participants. The instrument consisted of 16 questions pertaining to abuse of drugs that required the respondents to rate as applicable to them in terms of Yes and No responses. In this section, if any respondent answered YES to any one of the questions, this implied definite warning that client has drug problem. If any respondent answered YES to any two of the questions, this implied that the respondent was a drug addict. If any respondent answered YES to three or more questions, this indicated that the respondent was inclined to drug abuse. However, the preliminary instrument dealt with the demographic information of the participant such as name of school, Class of students, Age, Sex of student, fathers and mothers’ occupation. The respondents will be expected to ticked appropriate demographic items that agreed with their situations.

The instrument was validated by an expert in Measurement and Evaluation and two experts in the Department of Guidance and Counselling of Ambrose Alli University, Ekpoma. They ensured that the items on the questionnaire were relevant, clear and precise so that each of the items in the instrument measured what it was intended to measure. The test-retest method was used to determine the reliability of the instrument using a total of 60 students from JSS1-3 in the study area. The instrument were administered to them and re-administered after a few weeks to the same set of students in a pilot study. Their responses gleaned from the first and second administration were analyzed using the Cronbach Alpha Reliability coefficient. The result of the coefficient produced an r-value of 0.70 which was an indication that the instrument has internal consistency and the instrument was therefore reliable.

The researchers personally administered questionnaires to students after due permission was taken from the school authority. A letter to respondent was attached to further explain the purpose of the research exercise to solicit their cooperation in providing honest responses to the items in the questionnaire. The questionnaire was collected immediately after administration to enhance the return rate. Research question one was analysed using simple frequency counts, simple percentages, mean and standard deviations and Analysis of Variance (ANOVA) was used to test hypotheses.

Results

The results of the research question and hypotheses are presented below:

Research Question 1: Do adolescents in Benin Metropolis inclined to abuse drugs?

Table 1: Percentage distribution of adolescents who are inclined to abuse drugs

Points Schools	1 – 10 Never	11 – 20 Rarely	21 – 30 Occasionally	Above 30 Regularly	Total
Ihogbe	24(14.5%)	33(20.0%)	42(25.4%)	66(40.0%)	165
Oba Akenzua II	40(18.7%)	48(22.5%)	55(25.8%)	70(32.8%)	213
Oba Eware	52(42.6%)	22(18.0%)	18(14.7%)	30(24.5%)	122
Total	116(23.2%)	103(20.6)	115(23.0%)	166(33.2)	500

Result in Table 1 showed that Ihogbe 24 (14.5%) never used, while 33 (20.0%) said rarely used, 42 (25.4) admitted occasionally while 66 (40.0) claimed they regularly abused drugs. Oba Akenzua II, 40(18.7%) said never, while 48 (22.5%) said rarely used, 55 (25.8%) admitted occasionally, while 70(32.8) admitted they were regularly prone to drug abuse. While in Oba Eware, 52 (42.6) never used, 22(18.0) said rarely used, 18 (14.7) stated occasionally used drugs, while 30 (24.5) claimed that they regularly abused drugs. Therefore, the total number of student from these three school that never abused drug were 116 (23.2), 103 (20.6) rarely abused drugs, 115 (23.0) admitted occasionally used drugs, while 166 (33.2) admitted regularly used drugs.

Hypothesis 1: There is no significant difference in the efficacies of CBT, MET and the Control Group as regards the management of adolescents inclined to drug abuse.



PRETEST

Table 2: Descriptive of CBT, MET and Control Group at Pretest.

Group	N	Mean	Standard deviation
CBT	50	37.12	9.67
MET	50	41.51	8.12
Control	50	29.92	11.21

The mean and standard deviation of CBT, MET and Control are 37.12 and 9.67, 41.51 and 8.12 and 29.92 and 11.21 respectively for the pretest.

Table 3: ANOVA of CBT, control group and MET at Pretest

Groups	Sum of Square	df	Mean square	F	Significance
Between	3429.333	2	1714.667	18.038	.000
Within	13973.440	147	95.057		
Total	17402.773	149			

Significant at 0.05 alpha level

Table 3 shows an F-value of .000. hence the p-value .000 is less than an alpha level of .05, so the null hypothesis which states that there is no significance difference in the management of Secondary School Student prone to drug abuse using the two counselling strategies of CBT and MET is rejected consequently, there is a significant difference in the management of students treated with the two counselling strategies of CBT and MET.

Table 4: Descriptive of CBT, control Group and MET at Post test.

Group	N	Mean	Standard deviation
CBT	50	46.88	6.64
MET	50	44.10	9.33
Control	50	38.78	12.600

The mean and standard deviation of CBT, MET and Control Group are 46.88 and 6.64, 44.10 and 9.33, and 38.78 and 12.60 respectively for the post-test.

From descriptive Table 2& 3 the CBT value 37.12 versus CBT at post test, 46.88. while MET had a value at pre test of 41.51 (table 1) but at post test, had a value of 44.10 (table 3).

The control at pre test had a value of 29.92 (table 2), but at the post test had a value of 38.78 (table 4) respectively.

Hypothesis 2: There is no significant difference between male and female adolescents using the two counselling strategies of CBT and MET.

Table 5: Description of CBT, Control Group and MET by Sex

GROUP	SEX	Mean	Std. Deviation	N
CBT	Male	48.4444	3.67249	27
	Female	45.0435	8.70464	23
	Total	46.8800	6.64137	50
MET	Male	44.0313	9.10329	32
	Female	44.2222	9.99739	18
	Total	44.1000	9.33339	50
CONTROL	Male	36.1304	13.42421	23
	Female	41.0370	11.62716	27
	Total	38.7800	12.59947	50
TOTAL	Male	43.2683	10.42202	82
	Female	43.2353	10.29725	68
	Total	43.2533	10.33089	150

R Squared = .107 (Adjusted R Squared = .089)



The mean and standard deviation of CBT for male and female are 48.44, 3.67, 45.04 and 8.70 respectively, the mean and standard deviation of MET for male and female are 44.03, 9.10, 44.22 and 9.10 respectively, while The mean and standard deviation of control group for male and female are also 44.04, 11.63, 38.78 and 12.60 respectively

Discussions

Result in the null hypothesis which stated that there was no significant difference in the efficacies of CBT, MET and the Control Group as regards the management of adolescents inclined to drug abuse in Benin Metropolis of Edo State was rejected. Consequent, there was significant difference in the efficacies of CBT, MET and the Control Group as regards the management of adolescents inclined to drug abuse in Benin Metropolis of Edo State. This is in line with the findings of discovery of Mba (2008) who established that Nigerian Senior Secondary School Students under the influence of Indian hemp shed all inhibitions and produce behaviour that is inconsistent with school discipline. He also went further to observe that the increasing incidence of drug abuse among Senior Secondary School Students is a contributory factor in the ugly confrontation between school administration and students.

The study is in collaboration with the discovery of Egbochuku (1997) who observed an upsurge of incidents of drug abuse and traffickers as evidenced in the number of young people admitted into psychiatric hospitals, mental homes and prisons through the country. She added that drug abuser is one of the serious evils of our age and there has been a tremendous increase in drug abuse among young people throughout the world. Okoza, Aluede, Fajoju and Oikhu (2009) reported in a survey of Senior Secondary School Students in Ilorin, Kwara State found that 12% were currently using alcohol. In Jos; a lifetime consumption of alcohol among out-of-school adolescents aged 11 to 20 was 38.7% of the respondents. Sales (2006), stated that a significant number of the United States population having substance abuse problems is indicated by approximately 6% abusing illegal drugs, 12% having problems with drinking, 25% being addicted to nicotine and, conservatively, 10% addicted to prescription medications.

Results showed that there was no significant difference between male and female adolescents using the two counselling strategies of CBT and MET in Benin Metropolis of Edo State. This is an indication that both treatments were not sex biased but effective for both male and female in co-educational setting. At post test, the profile plot indicated that CBT, MET and control group for the males were on equal marginal means and also for the females were equally on equal marginal means, so the marginal means were linearly independent. Miller and Rollnick (1992) opined that Cognitive Behaviour Therapy (CBT) bears similarity to Motivational Enhancement Therapy (MET). CBT and MET share an exploration early in treatment process of what students/clients stand to gain or lose through continued substance use as a strategy to build up patients' motivation to change their substance abuse. CBT and MET differ primarily in emphasis on skill training, while in MET, it is the responsibility of the counsellor on how to go about changing their behavior get a self training suitable to them. These two strategies are complementary.

However, the result is collaboration with the findings of Okoza, Aluede, Fajoju & Okhiku (2009) who found the differences between both male and female. While 35.02% of male students abuse alcohol, 31.4% of female students abuse the same substance. 16% of male students use kolanut compared to 9% of female students, while 24% of male students use marijuana compared to 20% of female students. Librium is used by 11.8% of male students compared to 9.4% of female students and valium is used by 21.7% of male compared to 11.1% of females, and 14.7% of males use dexamphetamine compared to 3% of females. Reactivan is used by 6% of males compared to 1% of females, and 20.8% of males use mandrax compared to 10.4% of females, while 11.8% of males use Chinese capsule compared to 8.9% of females and 14.4% of males use cocaine compared to 1.7% of female students. None of both sexes use LSD. The finding of this study is in agreement with those of Fatoye and Morakinyo (1997), Eke (1997), Obot, et al (2001), and Eneh and Stanley (2004) that found differences between male and female students in their abuse of drugs.

Conclusion

The study examined the comparative efficacy of two counselling strategies in the management of adolescents' inclined to drug abuse in Benin Metropolis, Nigeria. Consequently, it was concluded that adolescents in Benin Metropolis was inclined to abuse drugs; there was difference between the two counselling strategies of Cognitive Behavior Therapy and Motivational Enhancement Therapy and the Control Group in the management of adolescents inclined to drug abuse in Benin Metropolis and there was no



significant difference between male and female adolescents using the two counselling strategies of CBT and MET in Benin Metropolis of Edo State. This simply implies that both treatments were not sex biased but effective for both male and female in co-educational setting.

Recommendations

Based on the findings, the researchers recommended that:

1. Effective interventions like Cognitive Behaviour Therapy and Motivational Enhancement Therapy and Educative programmes on drugs/substance should be carried out from time to time in the public and private Secondary Schools and in Federal Government Colleges
2. Drug free clubs should be encouraged among Senior Secondary School Students in Benin Metropolis and Nigeria in general
3. Efforts should be made by State Ministry of Education to sensitize the students through the use of intensive print and electronic media on the consequences of drug use and abuse
4. The counsellors posted to the Schools should be allowed to practice full time counselling so as to have more time for the students and carry out practical training skills on drug use and abuse on regular basis.

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