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**THE TWIN SOCIAL VICES: DRUG ABUSE AND ANTISOCIAL BEHAVIOURS AMONG  
CADETS OF NIGERIA POLICE ACADEMY**

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**ABSTRACT**

Despite being a global social and public health problem, drug abuse has been recognized to be implicated in antisocial behavioural manifestations. This study examines the relationship between drug abuse and antisocial behaviours among Cadets of Nigeria Police Academy. A total of 140 cadets comprising 87(62.1%) males and 53(37.9%) females ranging in age from 16 to 30 years with a mean-age of 23.18 years responded to Drug Abuse Screening Test (DAST) and Antisocial Behaviour Scale (ABS), via a cross-sectional survey. Correlation and one-way ANOVA analysis was adopted to test hypothesis using (SPSS 21 version). Results showed a strong positive significant relationship between DAST and AB at ( $r = .65, n = 140, p < .001$ ). The ANOVA analysis was also found to be statistically significant  $F(4, 146) = 22.10, p < .005$ , indicating that, higher scores on DAST, correspondingly led to higher number of antisocial behaviours. It was concluded that use and abuse of drugs is highly associated with antisocial behaviours, and that the higher the level of indulgence, the higher the antisocial behavioural manifestations.

**KEYWORDS:** social vices, drug use, drug abuse, antisocial behaviour, cadets,

**INTRODUCTION**

Drug use and its abuse has been acknowledged not only as a global social and public health problem but also associated with antisocial behaviours (Nardi, Cunha, Bizarro, & Dell’Aglia, 2012). Some studies confirm a relationship between drug abuse and antisocial behaviour (Fergusson, et al., 1996; Mason, & Windle, 2002) or crime (Oluwole, et al., 2017), though a complex one. For example, investigators who study large samples of community youths observe a strong association between reported serious offending and substance use in those groups (Johnston, et al. 2006; Ford, 2005). Antisocial behaviours and substance abuse problems appear to co-occur regularly in serious offenders; that is, offenders with high scores on one self-report measure also have high scores on the other self-report measure.

The act of using drugs in itself introduces the individual into the world of youth delinquency, otherwise referred to antisocial behaviours or criminal offences (Shoemaker, 2000). Such offences would include not only the illicit use of drugs, but also the offences committed with the purpose of obtaining money

to buy drugs (Macgarvey, et al., 1996). Social and economic concerns, such as crime, ill-health and premature deaths, and a significant loss in productivity are all affected by drug abuse.

In Nigeria, data confirms that every day, over 500,000 bottles of codeine are consumed by young Nigerians across the country, same with the intake of tramadol, rohypnol, marijuana, and other opioids (Ifijeh, et al., 2017). According to these authors, this represents an alarming trend that has subtly eaten deeply into the Nigerian fabric with children of all classes having a field day abusing these drugs. Today, psychoactive substances, such as cocaine and heroin are being consumed by youths (Federal Neuropsychiatric Hospital, Aro, 2012). Considering health implications, Elements Behavioural Health (2013) report that researchers at Marquette University, found 90 percent of all people with Antisocial Personality Disorder (ASPD) abuse drugs or alcohol. Whether officially diagnosed or not, as many as 40 to 50 percent of all people in substance abuse treatment programs have enough ASPD symptoms to verify an antisocial personality diagnosis. The simultaneous presence of substance abuse and ASPD is known as comorbidity. Comorbidity refers to the presence of two or more health conditions, as well as interactions between those conditions that intensify their effects on the body. In the case of drug and alcohol abuse, people who also have antisocial personality disorder tend to start abusing their substance of choice at an earlier age than people who don't have the disorder. It is important to note that men with comorbid ASPD and substance abuse problems do best when their treatment is mandated by a court of law.

Though drug abuse is recognized as a health problem and should be driven by health and social welfare concerns with total recognition of human rights of drug users, the strategies of intervention is lacking. Recently, Onyegbula (2017) recounted the concern expressed by Professor Obot, Director of the Centre for Research and Information on Substance Abuse (CRISA), that the rate of drugs and substance abuse among Nigerians was rapid with no corresponding access to treatment. This concern was further corroborated by the United Nations Office on Drug and Crime (UNODC) Project Coordinator, Response to Drugs and Related Organised Crime in Nigeria, Glen Prichard, that there was lack of access to drugs treatment in the country. Quoting figures, Prichard said that in 2016, only 1000 people accessed drug treatment in Nigeria which is a big gap in a country with about 180 million people (Onyegbula, 2017).

Despite the negative health, social and economic consequences of drug abuse and its attendant antisocial problems to individuals, families, communities and the country at large, little research effort is made to explore the link or association among university students and especially with respect to Police Academy cadets. Realizing the role judicial system can play in prevention and treatment of drug abusers, it has become imperative to explore the relationship between drug abuse and antisocial behaviour among Nigeria Police Academy Cadets. It is expected that this paper would undoubtedly raise understanding about the relationship between drug abuse and antisocial behaviours. It will also expose those concerned with welfare and rights of drug abusers, as well as the effects of antisocial behaviours in society to employ the necessary actions to combat it. This paper, therefore seeks to

examine first, whether there exist a relationship between drug abuse and antisocial behaviours, and second, if higher levels of drug abuse leads to more antisocial behaviours. The corresponding hypotheses are, 1. There is a significant relationship between drug abuse and antisocial behaviours among cadets; and 2. Cadets who indulge higher levels of drug are more likely to take part in antisocial behaviour than those who do not.

## **Concept of Antisocial Behaviour**

The prediction and prevention of antisocial behaviour among youths is predicated on the capacity of professionals to discern its cause. It is in this wise that considerable efforts in both theory and research have contributed to explaining these causes. However, despite these advances, the causes, and the interplay of series of antisocial behaviours still remain unclear. Besides, the complexity lies, in part, in the many factors that may influence the development of the antisocial behaviour within individuals, and which cut across various domains (e.g. individual, family, peer affiliation, school and community neighbourhood) and operate at multiple levels and different time periods.

For instance, parenting style is strongly implicated with youths antisocial behaviours, especially harsh and inconsistent parenting (Scott, 2008). Previous research point to other related direct or indirect factors such as domestic violence, parental drug abuse, maternal depression, family poverty, parents with low education, stressed families and single parent status (Webster–Stratton & Reid, 2008; Bloomquist & Schnell, 2005). Furthermore, studies report a significant relationship between high levels of parental warmth and lower levels of externalizing behaviour problems in youths. A close observation shows that lack of involvement, as well as poor monitoring and supervision of youths activities, strongly predict antisocial behaviour (Webster – Stratton & Reid, 2008).

What constitutes antisocial behaviour varies across time, context and culture. However, for a behaviour be considered antisocial, it must be abnormal or not socially acceptable. The behaviour does not allow the person to function effectively with other members of the society; meet up their own needs; and negatively affect the wellbeing of others. Individuals with antisocial personality often tend to mindlessly violate the rights of others (Squires, 2008; Widiger & Corbitt, 1995). Antisocial persons according to America Psychiatric Association (APA, 2013) are individuals who engage in pervasive pattern of disregard for and violation of the rights of others, occurring since age 15 years, as indicated by failure to conform to social norms with respect to lawful behaviours, as indicated by repeatedly performing acts that warrant arrest.

In Nigeria, many youths present these personality traits and because of the prevailing unemployment and poor economic situation of the country, it is difficult to explain whether or not these traits are normal survival strategies to existing realities. Drug and alcohol use alleged to precipitate antisocial behaviours can also be a response to societal difficulties. As antisocial youths become predatory or manipulative without remorse, they ruthlessly grow a broad trail of broken hearts to family and non-family members, shattered expectations and huge economic costs (World Health Organisation, 1996).

Neglect of correctional measures at the family, community and/or societal levels and politics of thuggery and patronage (Huruna & Jumba, 2011) becomes ardent reinforcing factors.

## **Relationship between drug abuse and antisocial behaviours**

A number of factors seem to have relationship with antisocial behaviour and one of them is drug use and abuse. The relationship between drug use and antisocial behaviours has been studied and analysed in several studies with adolescent samples (Copeland, et al., 2003; Eze, & Omeje, 1999). However, uncertainty still persists as to whether drug use predisposes user to crime or vice versa (Pudney, 2002). While some researchers indicated that drug use causes, or predicts antisocial behaviours among youths, other studies maintained that antisocial behaviours among young children predict drug use in the later part of their life. Findings from research by Galaif, et al. (2007) show that behaviour problems and aggression at younger age predict later adolescent illicit substance use. Besides, another group of researchers also found that problem behaviours and aggression at younger age escalate the use of these substances overtime (Hussong, et al., 2004), and later diagnoses of substance abuse and dependence (Velleman, et al., 2005).

To date, there is no agreement on the causal relationship between drug use and antisocial behaviours. While many studies point to offences as happening before the use of drugs, others suggest that drug use is the precursor to delinquency, and not the other way. It is important, however, to emphasize that the two hypotheses are not mutually exclusive. Since the 1980s, there has been evidence that drug abuse or dependence among adolescent offenders would be related with severity of antisocial behaviour (McManus, et al., 1984). For example, a longitudinal study by White et al. (2002) examining the relationship between alcohol/marijuana use and delinquent behaviour among 506 adolescents found that illegal acts committed under the influence of drugs were more prevalent among youth with more severe antisocial behaviours. Yet, Veirmeiren's (2003) study, suggests that conduct problems and delinquency often precede the onset of substance abuse.

Considering various research findings by some other researchers, it appears that antisocial behaviour and drug use have certain relationship but the direction of the relation is what still remains uncertain. A plausible argument on this issue is that provided by Wiesner and Capaldi (2005), who found that substance use and antisocial behaviour fluctuate in similar patterns overtime, suggesting a reciprocal or sequential relationship, but no causal relationship has been proven. Though, there are conflicting and divergent reasons for what causes antisocial behaviours among the young people, even local communities in Nigeria have fingered substances like alcohol and hard drugs as being responsible (Agbo, 2015).

The scholar reported a legal case that shed more light on the causal link between alcohol/drug abuse and antisocial behaviours, which purported restriction of the sale of dry gin within the locality. Whether or not the case was determined in favour of the complainants, it goes further to assert the important role the justice system can play to mitigate the likely or anticipated consequences in the

relationship between drug abuse and antisocial behaviours in our communities, through supply and demand restrictions.

## **Social learning theory of drug abuse and antisocial behaviours**

Learning theories on drug use just like the social learning theories of antisocial behaviour, explained that drug use is a learned response tendency formed and maintained through the same way that underlie every other form of learning. In Bandura's (1977) view, social learning is the product of reciprocal interaction between cognitive behavioural and environmental determinants of human behaviour. The development of both drug use and antisocial behaviours among Nigeria youths is dependent on these interactions, and learning occurs when such behaviours are accepted or not punished within societies. The theory as proposed by Akers (1973), centres on the idea that "the same learning processes in a context of social and academic structures, interactive and other similar situations produce both conforming and deviant behaviours thus, many researchers have used the theory to explain drug use initiation and various antisocial behaviours among different age groups in different settings.

## **METHODS**

### **Participants**

A total sample of 140 cadets comprising 87(62.1%) males and 53(37.9%) females ranging in age from 16 to 30 years and a mean-age of ( $M = 23.18,$ ) was drawn from the four faculties of Nigeria Police Academy, Wudil. Summary of respondents according to faculty were: Science 55(39.3%), Humanities 15(10.7%) Social & Management Sciences with 49(35.0%) and Law 21(15.0%) respectively.

### **Instruments**

Two standardised instruments were used to collect data in this study. These include Drug Abuse Screening Test (DAST-20), developed by Skinner (1982), and Antisocial Behaviour Scale (ABS), developed by Immanuel (2015).

**Drug Abuse Screening Test (DAST-20):** The Drug Abuse Screening Test (DAST) was developed by Skinner (1982) at the Addiction Research Foundation, Toronto, Canada, and is still an excellent screening tool. It is a 20-item self-report scale that consists of items, requiring "Yes" nor "No" responses that parallel those of the Michigan Alcoholism Screening Test (MAST). The DAST has "exhibited valid psychometric properties" and has been found to be "a sensitive screening instrument for the abuse of drugs other than alcohol.

**Antisocial Behaviour Scale (ABS):** The ABS is a 29-item scale developed by Immanuel (2015) to assess antisocial/psychopathic behaviour. It includes behaviours such as fighting, stealing, lying, killing, violence, aggression, bullying, as well as callousness, lack of guilt feeling even when one has done wrong, coldness, impulsivity, and so on. The ABS was validated on youths 12 years and above. The ABS has two factors: Factor 1 – Callousness - 16 items. These include item numbers 2, 8, 10, 12, 14, 19-29. Factor 2 – Anti-social behaviour – 13 items. These include item numbers 1, 3, 4, 5, 6, 7, 9,

11, 13, 15, 16, 17, 18. Thus, the ABS has construct validity. The internal consistency of the ABS was established with Cronbach’s alpha  $r = .82$ , and split-half reliability of  $r = .70$ , suggesting that the ABS is a valid and reliable instrument for assessing antisocial and/or psychopathic behaviour. The response options and scoring for the ABS are Always = 5, Almost Always = 4, Sometimes = 3, Rarely = 2 and Never = 1.

**Procedure**

As a lecturer in the Academy, the students were encountered in their lecture rooms during regular lecture hours. Respondents were asked to voluntarily participate in the study intended to understand what causes antisocial behaviours among cadets in the academy. They were also told that volunteering was tantamount to consent and assured of anonymity. The questionnaire was administered ten minutes to the close of lecture when permitted by the concerned lecturer. It usually took cadets approximately five to ten (5-10) minutes to complete the questionnaire, which was returned. Only the correctly completed ones were considered for analysis.

**RESULTS**

**Descriptive statistics**

The correlation means and Standard Deviations (SD), indicated that N = 140 (number of participants) scores for Drug Abuse Screening Test (DAST) was (M = 7.81; SD = 6.01) and Antisocial Behaviour (AB), (M = 73.30; SD = 22.30). The ANOVA order ranked means and Standard Deviations (SD) in Drug Abuse Screening Test (DAST) scores is depicted below.

**Table 1. Summary of ranked DAST means and standard deviations**

**Descriptives**

Antisocial Behaviour sum	N	Mean	Std. Deviation	Std. Error	Minimum	Maximum
<= .00 NO DAST	11	51.5455	20.35369	6.13687	32.00	89.00
1.00 - 5.00 LOW DAST	56	62.4464	17.07941	2.28233	37.00	141.00
6.00 - 10.00 INTERMEDIATE DAST	27	75.4074	17.58771	3.38476	42.00	114.00
11.00 - 15.00 SUBSTANTIVE DAST	26	84.8462	14.89078	2.92032	54.00	110.00
16.00 - 20.00 SEVERE DAST	20	97.7500	20.50898	4.58595	55.00	137.00
Total	140	73.2929	22.29769	1.88450	32.00	141.00

**Data Analysis**

The Pearson correlation analysis (r) Table 2 was used to test whether or not a relationship exists between the independent variable (DAST scores) and dependent variable (AB scores) to test the 1st hypothesis.

**Table 2. Summary correlations of DAST and AB**

Correlations		Drug Abuse Screening Test	Antisocial Behaviour sum
Drug Abuse Screening Test	Pearson Correlation	1	.649**
	Sig. (2-tailed)		.000
	N	140	140
Antisocial Behaviour sum	Pearson Correlation	.649**	1
	Sig. (2-tailed)	.000	
	N	140	140

\*\* . Correlation is significant at the 0.01 level (2-tailed).

The analysis results of table 2, indicate a positive significant relationship between DAST and AB scores. To test the first hypothesis, which states that “there will be a significant relationship between drug abuse and antisocial behaviour”, the result shows a positive significant relationship between DAST and AB at ( $r = .65, n = 140, p < .001$ ). The positive  $r = .65$  result indicates that DAST is strongly related to AB and the strength of the relationship is large (Cohen, 1988). This means that cadets who score high On DAST are more likely to engage or take part in antisocial behaviours than those who score low. This result provides answer to hypothesis one, and is therefore accepted.

The next table 3 presents results of ANOVA analysis to test whether differences in the ranked DAST scores produces effects in antisocial behaviour scores.

**Table 3. Summary of ANOVA analysis of antisocial behaviours**

ANOVA					
Antisocial Behaviour sum					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	27344.773	4	6836.193	22.098	.000
Within Groups	41764.220	135	309.365		
Total	69108.993	139			

For the 2<sup>nd</sup> hypotheses, it was postulated that “there will be significant differences in amount of DAST scores on Antisocial Behaviour”. The ANOVA analysis was found to be statistically significant  $F(4, 146) = 22.10, p < .005$ , indicating that the higher scores on use of DAST, correspondingly led to higher

number of antisocial behaviours committed. This ANOVA result confirms the 2<sup>nd</sup> hypothesis and the researcher therefore accepts it.

## **DISCUSSION AND CONCLUSION**

The theoretical and empirical findings from this study clearly support an association between drug abuse and antisocial behaviour among cadets and significantly reinforced the drug abuse – crime nexus. As expected, the correlation results strongly imply association between drug abuse screening test scores and those of antisocial behaviours. This result justifies the proposition that those who use and abuse drugs have higher propensity to commit antisocial acts than those who do not. Furthermore, the ANOVA summary result also indicated a significant difference between higher scores on DAST and proportionate antisocial behaviours. This implies that persons who abuse drugs are more likely to commit antisocial behaviours (maltreat, hurt, steal, violate social norms or take advantage of others, without the slightest sense of guilt or regret) than those who do not.

Several studies in the literature agree with the fact that there is association between drug abuse and antisocial behaviours (Galaif, et al., 2007; McManus, et al., 1984), the debate is inconclusive as to which causes the other. Though a strong association between drug abuse scores and antisocial behaviours was established in the sample, it is unclear whether other factors also account for the relationship. To support this position of extraneous factors, Gellman (2011) argues that alcohol and drug abuse are secondary problems and may be used to basically cover negative feelings created by the initial primary problems (such as childhood psychological, emotional, social or physical conflicts), ranging from childhood molestation to broken homes and depression. It is also worthy of note that such conflicts and conditions have high likelihood of been internalised, thus compelling victims to indulge antisocial behaviour as a way of acting out their grievances against society.

Similarly, for the results to posit that higher use or abuse of drugs lead to higher antisocial behaviours is consistent with earlier studies (Agbo, 2015; McManus, et al., 1984; White, et al., 2002). Even in such circumstances, Wiesner and Capaldi (2005), found that substance use and antisocial behaviour fluctuate in similar patterns overtime, suggesting a reciprocal or sequential relationship, thereby refuting the causal relationship that exist between these variables.

Theoretically, the findings of this study agrees with Akers (1973) position that, the same learning processes in a context of social and academic structures, as well as interactive and other similar situations produce both conforming and deviant behaviours. That is, the primary causes of drug use and antisocial behaviours among youths stem from personal (curiosity) or boredom and social (peer pressure), which represents norm of social learning, lack of direction and need to belong respectively. The prevailing regimented setting of Nigeria Police Academy may have provided social and academic structures or interactive situations that warrant drug use or abuse (conforming) and antisocial (deviant) behaviours. Thus, lending weight to drug use initiation and various antisocial behaviours among cadets.



Although the present results clearly support a strong relationship between drug abuse and antisocial behaviours, causal links cannot be established. Several uncontrolled variables may be implicated in compounding these results (Gellman, 2011). It is appropriate to recognize this as a potential limitation. Secondly, the regimented sample used for the study might limit its generalisability to conventional institutions.

In conclusion, the present study is important, in that it provides that there is a strong association between drug use and abuse and antisocial behaviours among cadets of Nigeria Police Academy. Besides, there is high propensity for those who use drugs to exhibit greater number of antisocial behaviours than those who do not, making the two of a kind twin social vices. Further researches should focus on intervening or mediating variables (personality traits, social support, parenting styles etc.) that are likely to affect the relationship. This would help in determining the mechanisms through which drug abuse transmits its effect on antisocial behaviours. Further contexts and populations should be explored to know whether or not such relationship exist to warrant policy changes where necessary. Finally, further research should direct attention to environmental (family and societal values, as well as merit principles of government) as possible factors affecting development, sustenance and social vices outcomes, by using qualitative which taps perceptions from participants' view. This line of research may make it possible to identify and treat individuals who suffer from these twin social vices. It is also crucial to developing our understanding of the psychosocial dynamics responsible for social vices, which will, in turn, encourage early detection and voluntary help seeking behaviour.

Considering the usefulness of policing to public good, I recommend that factors responsible to cadets' abuse of drugs be explored and necessary prevention and treatment strategies be employed to moderate antisocial behaviours among them. Drug abuse awareness education is recommended as a primary prevention, and counselling and/or psychotherapy as secondary prevention for drug abuse victims to mitigate antisocial behaviours among cadets.

### **Declaration of Conflict of Interests**

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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