ALCOHOL USE AND MENTAL HEALTH DISORDER AMONG YOUTHS IN RURAL COMMUNITIES OF ESSIEN UDIM IN THE POSTCOVID-19 ERA IN NIGERIA

Effiong, Umo Umoh

Department of Sociology and Anthropology Akwa Ibom State University, Obio Akpa Campus, Nigeria https://orcid.org/0000-0003-3613-867X E-mail: <u>umoumoh@aksu.edu.ng</u>

Innih Udokang

Department of Counseling Psychology Yorkville University, Fredericton,New Brunswick, Canada E-mail: <u>innihudokang@gmail.com</u>

Udom, Sunday Daniel

Department of Sociology and Anthropology Akwa Ibom State University, Obio Akpa Campus, Nigeria E-mail: <u>udomdaniel@aksu.edu.ng</u>

Nkanta, Nsikan Clement

Department of Sociology Ritman University, Ikot Ekpene, Akwa Ibom State, Nigeria. <u>nsynkanta@yahoo.com,nsynkanta@gmail.com</u>

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Abstract

The study focuses on alcohol use and mental health disorder among youths in rural communities of Essien Udim in the post Covid-19 era in Nigeria. The aim is to bring into the limelight an intervention strategy, via a community-based mental health approach, as an effective treatment option for mental challenges. Survey method with Rapid Individual Unstructured Interview (RIUI) and Focus Group Discussion (FGD) had been adopted and used. Participants are social workers in St. Joseph's Rehabilitation Centre, Ukana Iba, caregivers of affected persons, registered women, and youth groups. A simple random sampling procedure was used to select the participants. Data are analyzed using the qualitative approach to identify alcohol use disorder and rehabilitation interventions among youths in Essien Udim communities. Findings show a wide gap in the area of research, with no readily available information for public use. It also reinforces the need for a community-based intervention strategy to address knowledge gaps of alcohol use and mental health effect on the socio-economic livelihoods of the people.

Keywords: Alcohol use, mental health disorder, youths, rural communities

Introduction

Nigeria encountered psychiatric issues with treatment support and rehabilitation interventions for persons with alcohol-related problems (PAPs). Alcohol use poses a disproportionate impact on youths, especially those living with mental health disorder both in rural communities and psychiatry institutions (orphanages, day-care centres and rehabilitation centers), across the globe (WHO, 2020). Studies have shown that alcohol is most widely used psychoactive substance linked to mental disorders, and hence, contributes about 3.3 million or 6% of annual global death rates, with Nigeria confronted number of youths in sub-region Africa(Van Heerden, et al, 2009; Sudhinaraset *et al.*, 2016; WHO, 2019; UNODC, 2019). Alcohol consumption has become a culture in rural and urban communities in Mexico (Bennett, 1989). A study in the United States confirmed that youths aged 18-29 years found that 7% abuse alcohol and 9.2% are alcohol dependants(Drugs and alcohol use are significantly associated among college youths in Belgium (Adelekan *et al.*, 1993), and (Natera, 1995).

The consumption of alcohol in Nigeria has a long history amongst youths with palm wine, beer and native gin (akaikai) as the most commonly consumed alcoholic beverages, in most rural communities, compared to cities in Nigeria, (Effiong and Agha, 2020). The act, generally seen as normal, tend to be age related, poses harmful effects on the users (Usoro, *et al*, 2018). Alcohol consumption is perceived as having a couple of health benefits to users, such as medicinal properties in pregnant mothers, cures malaria, many users believed is good, (Usoro, *et al* 2018). Those who indulge in over-consumption of alcohol emphasize these benefits as an excuse to continue abusing alcohol (Nwagu *et al.*, 2017). According to Nevid *et al.* (2011), the risk has outweighed its benefits. Alcohol misuse alters normal behaviour or mental stability of users (Effiong and Agha, (2020).

Dumbili (2013) strongly linked alcohol misuse to mental disorder which can in turn leads to functional impairment, (Ukwayi *et al.*, 2013) Alcohol misuse compels users to become victims and perpetrators of violence in many communities in Akwa Ibom State. Unfortunately, studies on alcohol in Nigeria had focuses on the use of alcohol, while little is known about its related mental disorders resulting from the substance misuse (Effiong and Agha, 2020). Consequently, this study focuses on alcohol use and mental health disorder among youths in Essien Udim communities of Akwa Ibom State, Nigeria.

Theoretical Underpinning

This study adopted and applied the Mike Olivia's Social Model of Disability Approach captured in Haralambos and Holborn (2008), which sees social exclusion of people affected by alcohol misused by society (purposely or inadvertently) as may likely to pose negative effect(s) on increasing the rate of alcohol consumption, and by extension, mental health disorders. Thus, the study sought a rehabilitation strategy through community-based mental health services, an integral psycho-social inclusive approach which promotes social inclusion of persons with mental disorder resulting from excessive alcohol use within their own community (Effiong and Ekpenyong 2017; Effiong, Mboho & Wordu (2018) and Effiong, 2019). The strategy combines effort of the victims, communities' health agencies and other social services for its implementation, (WHO, UNESCO, ILO, IDDC, 2010). In this construct, community-based mental healthcare services are functional in terms of integrating persons with alcohol related problems to maximize their to access regular services and contribute to the overall societal function.

Materials and Method

Information used in this study was obtained from fieldwork conducted in 5 randomly selected communities namely: Adiasim, Ikpe Anaang, Afaha Ikot Ebak, Odoro Ikot and Nto Nsek in Essien Udim Local Government Area with rapid individual unstructured interview (RIUI) as the tools adopted to elicit information from the participants 10 FGDs and 216 RIUI were held in the communities. Separate FGDs were held for males and females to facilitate gender-based differences in alcohol use on community-based mental health services. Male participants were sampled randomly at beer parlours, drinking joints and other informal gatherings. The women were recruited through the women leader and women associations in the communities using systematic random sampling technique.

Discussion with study participants focused on what they know about alcohol use and mental healthcare services in their respective communities. Alarge quantity of data was harvested from the field survey. The researchers were faced with the challenge of reducing the raw narratives to a manageable size. This task was accomplished by reducing participants to a core representative group for each community. The core group reduced the information generated into sub-themes presented here.

Findings of the study

Awareness on the issues of mental health disorder caused by alcohol use

People with mental health issues experience difficulties in carrying out daily routines in rural communities. Studies have observed that people with mental disorder suffers movement restrictions which further exposes them to risks of accessing food, medicine and other essential needs of life, (<u>http:covid19-and-persons-with-psychosocialdisabilities-final_version</u>).

A 52 year male participant with disabilities in Ikpe Annang shared his thought on these issues, thus:

The aftermath of COVID-19 saw those with mental challenges living in institutions moving out of the rehabilitation institutions to live with their families with an untold hardship.

It further corroborates the positions of Ferreira-Borges *et al.* (2013) and WHO (2014) that the rate of alcohol used in Africa is very high.

A participant, (male), 45 years old and a member of Youths Group called Essien Udim Unity Forum in Afaha Ikot Ebak stated thus:

The use of alcohol cannot in any way cause any kind of mental problem in this life. Evil people and witches are responsible for mental problems that people have. When somebody hates you or your family, may be out of jealousy, they now use witchcraft to give you mental problem. It is not alcohol at all, at all... Sometimes, people commit bad things and blame it on alcohol; alcohol can even make you look cool not violent.

Effiong and Agha (2020) blame it on lack of sufficient advocacy on the harmful effects of alcohol on the users, as confirmed by findings in Usoro, Ononokpono, Ette and James (2018).

Another participant (female) and a member of Ukana Women Group, Iban Nto Udo in Ikpe Annang opines:

"Youths, at most times increase many unhealthy lifestyle or behaviour that cancompelling them to contemplate suicide ideas".

Excessive use of alcohol poses negative effects which influences poor academic performance and drop-out amongst students across the globe, (Ukwayi *et al.*, 2013).

A 26 year old female respondent sampled at a local palm wine/beer parlour in Odoro Ikot, on dangers associated with alcohol misuse and mental well-being thus:

"Plenty people wey the drink alcohol sabi negative effective, sometimes they try stop but they no fit stop am...as for me, I dey take as much as my strength go carry me...... mbok!".

This shows that some people are aware of the harmful effects that alcohol use can cause the users viz-a-viz mental health disorder, which has confirmedIorfa*et al.* (2018) on their study entitled: "Substance Use Among Youths: Roles of Psychoticism, Social Alienation, Thriving and Religious Commitment" that drug abuse and alcohol misused seriously thrived among the secondary school students in Southeastern Nigeria.

Awareness on existence of mental healthcare services in the area

Many participants in the study stated that people were not aware of the mental health disorder posed by alcohol use on the users. Some participants disclosed that the level of mental health services was better than what it used to be due to availability of educating programmes.

A 56 year old male participant in Adiasim and member of Unity Forum avers:

Personally, I do not have any idea of a law that seeks provision for the disability services in Nigeria, yet, whether for the physically challenged, visually or hearing impaired, not to even talk of people with alcohol or psychiatry problems.

Jugessur and Iles (2009) note that advocacy in health and social care is important in addressing issue of minority status and mental health disorder while Effiong and Ekpenyong (2017) aver that the challenges facing disability in Nigeria continues because they are always treated with levity. The absence of mental healthcare services and limited advocacies are contributing factors, (Effiong and Agha 2020).

Another 40 years old, female, participant and a member of a Women Group called Nka Uwam, Ikpe Annang states that:

People are now aware, but the awareness is not hundred percent, if I want to grade, let me grade with 55% but with time they'll be enlightened little by little.

Another 30 years old male, participant, and a member of Nka Ima Youths Development Association in Odoro Ikot responded, thus:

I can say the awareness is encouraging because as a member of the youth association, we use to have some programmes on radio and in the course of the programme we usually share our feelings in the area of awareness and anything on media is to all the world so am very sure it is somehow encouraging.

A female participant aged 37 years, and a member of the Sweet Ladies Association in Adiasim comments that the major platforms identified for generation of alcohol misuse or abuse and the awareness of mental health care services were the radio and schools. It was, however, observed that the platforms were not much. The views of participants are provided below:

Yes, there are platforms, like schools and some programmes on the radio stations, still, most people have very limited information about this.

A male participant, 26 years old, and a member of Uyo Mkparawa Ikpe Anaang, a Youth Group posits that:

The platform which is radio, where dem dey speak English where I no dey understand unless person de come interpret am for me

It can be observed that while some agreed that the platforms to raise awareness on mental health care services exist, but however expressed the challenge with the mode in which messages are communicated. This is in line with CBM (2010), which observed that in time past, many people were not aware, but by and large, with educating programmes and other things, people are beginning to grab something about persons with alcohol problems (PAPs).

Though the condition of most persons with mental disorder is enduring, especially if intervention did not start early, yet they can be treated and remedied on the seeming best way of caring for persons with mental disorder resulting from harmful used of alcohol.

A 51 year old female participant in Afaha Ikot Ebak explains that:

....although our society has tried in building psychiatric institutions or hospitals for people with mental health disorders, it is more appropriate to involve the social services of the community members. She further emphasised that:

That community-based mental health rehabilitation services is a more appropriate way of taking care of people with psychiatry problems, involving services of the community members is more appropriate.

This corroborates the Thomas (2005) that because medical, educational and livelihood services are scarce and often too costly for people with disabilities to gain access, a cost-effective strategy is to reach persons with disability within their own communities through CBR which makes use of existing community services and promotes inclusion instead of exclusion by involving their families, communities, and other relevant organisations or institutions.

Similarly, another interviewee and a civil servant in Odoro Ikot explains that:

A number of strategies such as increased advocacy, medical intervention, social intervention, psychosocial interventions can actually help in ameliorating the condition of people with alcohol problems, and by extension, persons with mental health disorder. Thus, government and development agencies should ensure that drugs and intervention services are provided and easily accessed by the victims. On the other hand, the victims and their care-givers/families should seek for adequate information on possible causes and treatment of mental illness from competent health experts and institutions.

Possible Challenges Experienced by Persons with Mental Health Disorder

Various challenges posed by alcohol use for people with alcohol problems (PAPs) were identified. Participants highlighted inaccessibility to mental healthcare services, cultural perception and unemployment for the people with alcohol problems, coverage of mental health cost, unavailability of mental health workers, among others.

Limited availability of Mental Healthcare Services

Participants shared their views on accessibility of health care services. It was reported that most of the services were not accessible.

A male participant, 45 years of age in Afaha Ikot Ebak opines that:

The lack of appropriate services for mental health disorder is one of the most significantbarriers to using health facilities. Limited services make it difficult for people withmental health disorder to receive complete treatment once they accessed clinics in mostrural communities.

Guar and Ivom (2010) observe that inadequate provision of medical and rehabilitation services for people with psychiatry problems in Nigeria prevents many mental health challenged persons to accessing medical healthcare.

Unemployment

One of the interviewees, a 42 years old male blamed poverty as one of the contributing factor to alcohol use in the area:

You know there is nothing that poverty cannot cause, especially in a country where the leaders are insensitive to the plights of their numerous citizens. Unemployment pushes a lot of jobless youths into uncontrollable activities like excessive alcohol intake, which could in turn lead to mental health disorder witnessed amongst our youths.

Effiong and Ekpenyong (2017b) confirmed that a strong relationship exists between poverty and disability with each being both a cause and a consequence of the other. Similarly, the United Nations in 1994 submitted that the majority of people with mental disabilities live in low-income countries, including Nigeria, and are locked in a downward spiral of poverty and marginalization. The foregoing shows that there is a relationship between poverty and disabilities of all forms.

To ascertain if certain human, political and civil rights and fundamental freedoms of persons with mental challenge are largely denied in Nigerian societies, one of the interviewees, another male participant, aged 47, responded thus:

What business do mentally challenged persons or mad people have with politics or voting, for instance? Sane or normal people have not finished participating in elections or politics, not to talk of abnormal or insane people. In fact, such people living with psychosocial disabilities should not be seen in the corridors of politics, whether it is voting or contesting.

Interestingly, the United Nations Convention on the Rights of Persons with Disability (UNCRPD) recognises that it is important for persons with mental challenged to have adequate access to the physical, social, economic and cultural environments; health; education; information and communication (Akpan and Effiong, 2021). However, this accessibility is significantly limited due largely to lack of implementation and regulation of law and policies, stigmatisation, inadequate financial resources and inadequate evidence-based research to quantify and implement solutions (Effiong, 2019). The same applies to persons with mental challenged or persons with psychosocial disabilities in Nigeria and other developing societies.

Cultural Influence and Practice

Alcohol forms part of many social gatherings in Africa, and it is central to many cultural activities (Galvani, 2015). Participants believed that some customs and traditions of most communities subtly played some roles in the misuse of alcohol by the youths in the area.

A female participant, age 39 years and a representative in Iban Nto Udo Association in Nto Nsek submits thus:

As I said, a lot of items are listed for the consultation or invitation (if you like) of our group by celebrants to participates in their celebration, where some of our pathological alcohol users formed the habit of drinking to stupor in most cases.

Social influences with local cultural norms are central factors that can influence the use of alcohol (Nwagu, Dibia & Odo., 2017; Effiong & Ekpenyong, 2017b).Okonkwo and Oguamanam (2013) affirm that the use of alcoholic beverages has been an important aspect of many cultures for thousands of years.

Again, below are the views of one of the participants:

Another 52 years old female participant in Adiasim responded thus:

Alcohol, such as palm wine, beer and native gin-distilled from palm wine is consumed greatly during rituals, marriage ceremonies, burials and funerals. During such occasions, palm wine and hot drinks are specifically used in making libations, offering prayers and heralding such events.

In like manner, another male participant, 46 years of age in Afaha Ikot Ebak, a representative of a famous youth group in Essien Udim opines that:

... their indigenous culture play dominants role in the misused of alcohol and by extension contributes to the prevalence of mental disorder amongst the youths in the area.

Interestingly, an often-neglected predisposing factor was discussed by another 63 years old female participant in Odoro Ikot, thus:

Our negative or unhealthy cultural beliefs and attitude towards persons with alcohol problems has contributed immensely to the seemingly appreciable number of people with mental disorders we have in our society. When some of them began to display some degree of psychosocial problems, we were busy attributing it to witchcraft instead of seeking formal medical attention. We watched them misbehave and rather labelled them 'witch' and excommunicated them instead of helping them. The worst thing that happens is when you take them to 'prayer houses' where they are immediately labelled 'witches' and their condition 'spiritual' and 'sacrifice-demanding'. The 'prayer houses' end up worsening the situation.

Furthermore, the participant laments that:

we have lost a number of our brothers and sisters to psychosocial disabilities due to our negative cultural/religious beliefs and attitude.

Coverage of Mental Health Cost

Exorbitant cost of rehabilitation services in Nigeria constitute a barrier to mental health and predispose persons with psycho-social disabilities (PPSDs). A male interviewee, aged 54 years in Adiasim explains that:

The high cost of orthodox rehabilitation is therefore a major barrier in mental wellness because it ensures that the increase of limited access to orthodox drugs for persons with mental health disorders.

It is important for persons with alcohol problems to have adequate access to rehabilitation services that will make them to function independent in life. However, poor accessibility to rehabilitation services in Nigeria has added to the frustration of the people with mental health disorder (Lang and Upah, 2008; Effiong, Udousung and Udoh, 2018, Effiong, Ekanem, and Ottong, 2023).

Corroborating the female participant, another 35 years old female participant in Odoro Ikot responded thus:

Many of the victims of alcohol misuse do not have the funds to pay for rehabilitation services in hospitals.

Exorbitant cost of rehabilitation services in Nigeria constitute a barrier to mental health and predispose PPSDs and their care-givers or families into over-the-counter drugs and non-adherence to medication. Base on this, a male interviewee age 54 years explains that:

...rehabilitating people with mental disorders in the orthodox way are a costly venture, and as a result, the people and their care-givers/family members resort to traditional methods or treating them anyhow. The high cost of orthodox rehabilitation is therefore a major barrier in mental wellness because it ensures that the increase of limited access to orthodox drugs for people with mental illness.

It is frustrating that even when the Discrimination Against Persons with Disabilities (Prohibition) Act, 2018 has stipulated that free medical and health services shall be provided to disabled persons in all public health institutions, people with mental health issues in Nigeria are yet to enjoy free medical and health services. While this advocacy calls for the implementation of the law, Lang and Upah, (2008) opined that there is need for the affected persons to show the extent of accessibility gaps that exist.

Conclusion and Recommendations

This study investigated the knowledge of alcohol use, mental health disorder and the awareness of existence of community-based mental healthcare services for people with alcohol problems in Akwa Ibom State. Based on the findings this study, we can conclusively say there was weak

awareness and knowledge about alcohol misuse and mental health disorder in Essien Udim Local Government Area of Akwa Ibom State. As it has been documented in previous studies, public awareness on dangers posed by alcohol misuse was low and accessibility of mental healthcare services was poor. It was observed further that most people were not aware of the existence of the services in the area or do not have knowledge of its provisions. Lastly, it was revealed that mental health disorder was not a priority of government.

Based on the findings, the following recommendations are made:

- i. The governments should provide more opportunities and platforms for continual education of the public on alcohol use and the effects on mental health.
- ii. Communities and societal processes have to be built in a way that will help dispel unnecessary misconceptions to reduce stigmatization and discriminations about people with mental health issues in Essien Udim communities of Akwa Ibom State, Nigeria.
- iii. Healthcare facilities in the area should put community-based mental healthcare services at the forefront to enable people with alcohol problems access important mental healthcare services.
- iv. There is need for advocacy programmes to make mental healthcare services in Nigeria, a priority of local government. This could have direct implications on the awareness and effective provision of good policies that could lead to inclusive development.
- v. That a cost-effective strategy, community-based mental healthcare services which has the capacity to be implemented through the combined effort of people with mental health disorder themselves, their family members, organizations, communities and the relevant governmental and non-governmental health organisations, education, vocational, social and other services should be employed to make use of existing community services to promote inclusion instead of exclusion of people with alcohol use problems.
- vi. Stakeholders should adopt and reinforce the de-institutionalization strategies to close institutions and return people with mental disorder to the community, and strengthening their supports and services.

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