

Psychoeducation of the Nigeria Population on Knowledge of Substance Abuse, Drug Addiction and Regular Medical Check-Up

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Abstract

This paper aims to enhance psychoeducation among the Nigerian population regarding substance abuse, drug addiction, and the importance of regular medical check-ups. Substance abuse and drug addiction are significant contributors to various medical health conditions and mental disorders within the Nigerian populace. Many of these conditions could potentially be prevented or managed effectively if early detection of abnormal neurotransmitter changes in the brain was facilitated through routine medical examinations. This study highlights the alarming scarcity of knowledge and poor attitudes towards substance abuse, drug addiction, and regular medical check-ups in Nigeria, as evidenced by empirical data from psychiatric research. Such deficiencies hinder individuals from making informed health decisions and recognizing risk factors associated with unhealthy lifestyles. According to the World Health Organization, as well as the International Classification of Diseases (ICD-11) and the Diagnostic and Statistical Manual of Mental

Disorders (DSM-5), substance abuse and drug addiction are classified as diseases that require treatment, akin to conditions such as diabetes, cancer, heart disease, and HIV. In light of this, the paper calls on the government, as well as the management of healthcare institutions, clinical psychologists, and other healthcare professionals, to prioritize intensive psychoeducation initiatives. These initiatives should focus on raising awareness about the dangers of substance abuse and drug addiction, as well as preventative measures. Moreover, the government and health institutions should collaborate with philanthropists to establish more psychiatric hospitals and rehabilitation centre, providing testing equipment and medications at subsidized rates across all healthcare levels. This would enable individuals struggling with substance abuse and addiction to access necessary services, gain insights into their health status, improve their overall well-being, and alleviate the catastrophe financial burdens faced by their families and loved ones. In conclusion, this paper emphasizes the urgency of addressing these issues and provides actionable recommendations for creating a more informed and supportive environment for those affected by substance abuse and addiction.

Keywords: Substance abuse, drug addiction, regular medical check-up, Nigerian population

Introduction

Globally, an estimated number of drug-related deaths in 2014 corresponded to 43.5 deaths per million people aged between 15 to 64 years (World Drug Report, 2016). This trend continues to highlight a significant gap in service provision, as in recent years, only one in six individuals with substance abuse and drug addiction problems has access to or receives treatment. This problem is particularly stark in Eastern and Southeastern Europe, where the average rate of injecting drug use is about 4.6%. This has led to numerous cases of medical conditions and mental disorders. Several studies have shown that people who inject stimulants engage in riskier sexual behaviors, leading to a higher risk of contracting HIV compared to those injecting opiates.

Overall, men are three times more likely than women to use cannabis, cocaine, or amphetamines, whereas women are more likely than men to engage in non-medical use of opioids and tranquilizers. In Africa, it is estimated that over three million bottles of Benylin syrup are consumed for substance abuse. In Nigeria, empirical studies have shown that in both Kano and Jigawa States, the daily consumption of Benylin syrup has become rampant

due to the scarcity of cocaine (Newspaper report Tina Akannam, 14th November 2008). In Nigeria, it was found that one in seven people aged 15-64 years had used a drug other than tobacco and alcohol in the past year.

According to the World Health Organization's International Classification of Diseases and Related Health Problems (ICD-11) and the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-5), substance abuse and drug addiction are classified as diseases, similar to HIV, diabetes, high blood pressure, and other medical conditions. This classification underscores the need for comprehensive treatment and intervention strategies to address these issues within the Nigerian population.

Psychoeducation

This is defined as providing clear information to patient and families about mental health conditions including schizophrenia in order to improve understanding support and treatment outcome. It can also be defined as the process of providing knowledge, information resource and coping skills that is related to specific mental health. Psychoeducation is taught by professional and improve mental health outcome, empower people with knowledge and tools , reduce stigma and increase awareness within the community. This plays a crucial role in enhancing the overall mental health landscape for individuals living with mental health conditions, such as schizophrenia, and their families.

Goals of Psychoeducation

- **Reduce stigma:** Stigma can be barrier to people seeking care. The individual need to be educated about concerns, sign and symptoms and available treatment option can help decrease stigma and increase access to care.
- **Becoming informed about proper care.** Patient and families must be informed about care when dealing with mental health condition Psychoeducation can cover treatment options what to expect from treatment and how activity participants in care
- **Providing tools and resources:** This involved teaching other about tools and skill they can use to manage their symptoms. This could scale or tracking for monitory symptoms which is helpful information for therapist.
- **Improving treatment outcome:** Psychoeducation can explain the evidence supporting the treatment and help individual set realistic expectation about the

outcome and progress. It can also give patient b a voice in decision making when they are more informed about options.

- **Building coping skills:** Psychoeducation provide tools, skills and strategies for tracking and managing symptoms and improving overall wellness and quality of life. This goes to strengthened coping mechanisms by equipping patients and their families with coping strategies and helps them to manage stress, triggers, and symptoms more effectively. Ultimately, enhancing resilience and promotes adaptive behaviors (Lindsay et al., 2014).
- **Increasing support:** The increase understand and compassion from psychoeducation can increase support system and family relationship
- **Advocating for funding and legislature** knowledge and education about the impact of mental help can help communities' strength their support for mental health progress and funding.
- **Provide holistic approach:** Psychoeducation can be integrated with other therapeutic interventions, fostering a holistic approach to treatment that addresses both biological and psychosocial factors impacting mental health (Friedberg et al., 2012).
- **Facilitating of Open Dialogue:** By providing a safe space for discussion about mental health, psychoeducation encourages open dialogue, helping to normalize conversations around mental health issues both in families and within broader social settings (Gonzalez et al., 2018).
- **Empowerment through Knowledge:** Knowledge is a powerful tool. Psychoeducation empowers individuals by demystifying mental health conditions, thus enabling them to take an active role in their care and decision-making processes (Chien et al., 2013).
- **Promotes Community Resources:** Psychoeducation can guide individuals and families toward available community resources, support groups, and services, enhancing their support network and fostering a sense of community (Bledsoe & Tully, 2019).

By emphasizing these aspects, psychoeducation not only aids in the immediate understanding of mental health conditions but also fosters a culture of empathy,

support, and proactive engagement in mental health care, ultimately leading to better outcomes for individuals and communities alike (Barker et al.,2017).

Substance:The term "substance" is often used interchangeably with "drug," but it encompasses a broader range of chemical agents. In a medicinal context, substances are defined as agents used to relieve symptoms such as fever, pain, or cough. These drugs are typically prescribed by qualified healthcare professionals and include medications like paracetamol and codeine, which are used to treat various illnesses. Conversely, "substance" can also refer to chemicals that are not primarily medicinal and can lead to intoxication and behavioral changes. In the field of substance use and abuse, professionals prefer the term "substance" over "drug" to include a wider array of chemicals, such as alcohol, tobacco, marijuana, and illicit drugs, which may be used recreationally or for non-medical purposes.

Idowu and Abolarin (1996) defined substance as any chemical taken into the body to alter an individual's physical and psychological functioning. Halgin and Whitbourne (2000) further elaborated that substances are chemicals that can alter a user's mood or behavior when smoked, injected, ingested, inhaled, or consumed in pill form. Substance abuse is typically defined as the misuse or overuse of substances, including prescription medications and alcohol, as well as the use of illegal drugs. This implies that any use of a drug in a manner other than intended constitutes abuse.

Substance Abuse:According to the World Health Organization (WHO), approximately 275 million people worldwide used drugs in 2020, highlighting the global scope of substance misuse (United Nations Office on Drugs and Crime, 2021). While substance abusers may represent a minority within the population, their actions can have devastating consequences, not only for themselves but also for society at large. Substance abuse is often described as a self-destructive behavior that can lead to significant harm, including irreversible physical and psychological damage. It transforms individuals from assets to liabilities, leaving lasting impacts on both users and their communities.

The National Institute on Drug Abuse (NIDA, 2021) defines substance abuse as the use of illegal drugs or the misuse of prescription or over-the-counter medications and alcohol in ways not intended by their medical purpose or in excessive amounts. Such misuse can lead to a range of social, physical, emotional, and occupational problems. The WHO further defines substance abuse as the harmful or hazardous use of psychoactive substances,

including alcohol and illicit drugs, which can lead to both physical dependence and psychological dependence (World Health Organization, 2021).

Physical dependence: Physical dependent is caused by prolong use of drug is refer to an altered physiologic state in which withdrawal symptom develop when the drug is discontinued. This could also be defined as a stage where the body requires the substance in order to function. Prolonged use of any drug can lead to altered physiological functioning marked by tolerant and withdrawal symptoms (Richter, 1975).

Psychological dependence: This refers to the need to continue with the use of the substance and inability to discontinue the use of such substance. Prolonged use of a particular chemical substance can often leads to psychological dependence. A psychologically dependent user of a substance mostly fails every attempt to abstain from the substance (Richter, 1975).

Drug dependence: Drug dependence refers to a stage where there is loss of control due to drug use. A drug dependent [person craves for the drug or continue to use the drug despite various problems associated with drug use. Most drug abusers are not only psychological and physically addicted but they are also physically and psychologically dependent on substance.

Intoxication: This is defined as psychological changes resulting from the accumulation of a substance in the body or temporary manifestation of maladaptive behaviour as a result of excessive consumption of a substance. It can also be described as a state in which an excess of substance poisons the body, leading to uncoordinated actions intoxicated person may be unpredictable because the user's brain functioning is impaired.

Tolerance : This is stage when an individual requires larger amounts of the substance in order to achieve the same desired effects or when a substance abuser feel less of its effect after using the same amount of the substance. At this stage, the effect of the drug diminishes if the same dose is taken repeatedly, as a result, the abuser must increase the dose to achieve the desire result effect. Most addicted smokers probably start with a stick or two per day, with time this number would not give them the desired effect; hence the need to increase the number of the sticks. The same with alcohol drinks where he or she needs to increase the number of quantity consumed in order to have the desired effect. In that case, the more alcohol an individual consumes the more alcohol the person needs to

achieve the desired impact. At his stage, heavy smokers or alcoholics tend to increase their intake of cigarettes or alcohol over times.

Withdrawal Symptoms: These are psychological and physical changes an abuser of drug experience following the stoppage of the use of a substance. When a addicted individual is unable to get a drug or deprived of a drug, he or she crave for it, without it the abuser becomes restless and manifest withdrawal symptoms like impatience, hostility, anxiety, depression, insomnia, restlessness and increased appetite. Other significant withdrawal symptoms include fatigue, distress, impairment, at home and at work. This symptom could also be distressing symptom that occurs following the cessation of regular use of certain drugs.

Relapse: Relapse simply means returning to the use of substance consumption after a brief period of abstinence. Many people having realised the consequences of a substance abuse may decide to stop the use of the substances. Later, they may feel the urge to use the substance (relapse. Relapse is not necessarily a failure on the part of the abuser. It may be hard and often it takes times before such people finally quit the use of a substance, initial setbacks may be manifested in form relapse.

Signs and symptoms of substance abuse.

Possession of substance or drug paraphernalia: One of the symptoms of substance abuse individual is the possession of substance or drug paraphernalia. When you check the individual bag or pocket and you may find a substance like cigarette or Indian hemp, he or she is in the possession of substance. In other way when you find a drug paraphernalia like match box, lighter, empty bottle of beers or ashtray in the house.

Odour of the substances: The drug users easily been detected from the body odour or mouth of an alcoholic. This is the reason the Federal Road Safety Corps often assess the mouth odour of the drivers where there is an accidents to establish whether the accident is caused by excessive consumption of alcohol or others intoxicating substances. In this case, some in an attempt to cover up usually use perfume or lick sweet.

Physical appearance: From the physical appearance of an individual who abuses drug, one will notice certain abnormality. For example the lip of a chain smoker may be as dark as charcoal, some may burn their fingers during smoking; the eyes of an Indian hemp smokers may be red.

Crave for substance: The drug users will always crave for substance whenever the urge to use a substance come. The individual will always strive to use substance. Studies have shown that the urge to use substance is higher than the urge to have sex by the individual who abuses drugs.

Withdrawal Symptoms: Sometimes, the substance users may realise the need to stop the use of substance because of the negative effect, some may stop temporally and later relapse, and some may find it difficult or impossible to stop the use of the substance. Withdrawal symptoms can manifest in the users behaviour pattern, some abusers may become suddenly withdrawn, depressed, hostile, or uncooperative. Some may inexplicably withdraw from old friends or from family members. Withdrawal symptoms can also manifest in poor academic performance or decline interest in school activities like truancy and skipping classes. This the reason why many abusers remain unhappy until they go back to the drug habit often when the habit relapse the console themselves with statement like something will kill a man one day, man no die , man no rotten. It could also occur due to non-availability of the substances.

Drug addiction: Drug addiction is a complex illness characterised by compulsive and at times uncontrollable drug craving, seeking and that persist even in the face of extremely negative consequences (NIDA,1999). The behaviour of the individual who is addicted to drugs is reinforcing or rewarding. A major feature of addiction is the loss of control in timing intake of the addicted substance. The most recent study of an individual who is addicted to substance showed that the brain rewarding pathways may be even more important in craving association with addiction compared to the rewarding itself. Scientists have learnt a great deal about the biochemical, cellular and molecule base of addiction as a disease of the brain. The addicted individual is been influenced by a multiple of highly entangled factors. This implies that there is no single factor that can determine someone who will or will not become addicted to drug. Drug addiction can be physical or psychological

Physical addiction: This is the stage where the body is accustomed to a particular substance. Any attempt to stop a particular substance may lead to physical illness. It is the stage where physiology of the body has been changed by the drug and as a result the body reacts when the substance is no longer used or administered.

Psychological addiction: This has to do with the belief that a particular drug is needed in order to response or cope with the stress of daily living. It is a state where the substance users rely so much on the drug in order to response or cope with stress of daily activities. At this stage, any attempt to stop the substance may lead to anxiety or psychological discomfort

Stages of substance use and substance abuse

Experimentation stage: This is the stage whereby the individual due to curiosity or peer pressure take s a particular substance. The individual may take a sip of local gin.. The individual stop using the substance after taken a dose. This means an individual stop at the experimental stage.

Social or occasional: users: This stage an individual use a particular substance during social gathering or functions like wedding, burial party. There are some adolescent who cannot smoke except when they meet with their friends. Similarly there are some adult that may not drink alcohol except when they meet with their friend at burial functions, promotion and others functions. They are called social or occasional users.

Regular users: This is the last stage of substance use and substance abuse. Regualr users are individual who use substance at anytime and anywhere. An addicted smoker can wake up around 2 o'clock in the morning and start smoking. Regualr user are often not in control of themselves. They are the stage of addiction and dependent on the substances.

Diseases and Mental Disorders

National Institute on drug abuse, advancing science (2011) revealed that people with drug addiction have one or more associated health problems which include Heart disease, Stroke Cancer: Tobacco smoking can cause cancer Increase the risk of contracting HIV and hepatitis, B, C or serious liver disease Infections of the heart can cause skin infection by exposing an individual to bacteria, Loss of memory, Academic or career challenge, Interpersonal relationship difficulties, Unsafe, illegal or at risk behaviour. Other complications of substance abuse and addiction especially overdose of opioid drugs may affect the part of the brain that regulate breathing and if not treated quickly may slow down or stop completely and leading to death

Mental Disorders: Mental disorder is characterized by clinically significant disturbance in an individual cognition, emotional regulation or behaviour. It is usually associated with distress or impairment in important areas of functioning. It is also defined as mental health conditions.

Mental disorders Associated with Substance Abuse and Drug Addiction

Anxiety Disorder: This disorder is characterised by excessive fear and worry and related behavioural disturbance symptoms that are severe enough to result in significant distress or impairment in the future. There are several types of anxiety disorders such as generalized anxiety disorder characterized by excessive worry, Panic anxiety disorder is characterized by panic attacks) social anxiety disorder is characterized by excessive fear and worry in social situation) Separation anxiety disorder is characterized by excessive fear or anxiety separating from those individuals to whom the person has a deep emotional bond.

Depression disorder: This is a mental disorder that is characterized by experience of depressed episode such as feeling sad, irritable and empty or loss of pleasure or interest in activities for most of the day nearly every day for at least two weeks. Several symptoms which may include poor concentration, feeling of excessive guilt or low self-worth, hopelessness about the future, thoughts about dying or suicide disruption, sleep change in appetite or weight and feeling especially tired or low energy.

Psychosis: This refers to the term for collection of symptoms that happen when a person has trouble in differentiating what is real and what is not real. The disconnection from the reality can happen for several reasons including many mental and physical conditions, Alzheimer diseases, hormone related condition like Addison disease and Cushing disease. For example when your thyroid gland is too active or not active, infection of the brain, lupus, Lyme disease, multiple sclerosis, stroke and other neurological (brain related condition), Vitamin B1 and B12 deficiency, Misuse of alcohol, prescription of medication or recreational drugs, severe head injuries, traumatic experience (present or past), experiencing high level of stress or anxiety. Diagnostic Statistical Manual of psychological disorders (DSM5) has categorised the condition of psychosis to be schizophrenia spectrum and other psychotic disorders as followings:

Schizophrenia disorder: This disorder is characterized by significant impairment in perception and changes in behaviour. Symptom may include persistent delusional, hallucination, disorganized thinking, highly disorganized behaviour or extreme agitation.

People with schizophrenia disorder may experience persistent difficulties with their cognitive functioning

Treatments of Mental Disorders

Medication: A patient with psychosis with psychosis problem would be given antipsychotic drugs which are very common type of medication for the treatment of psychosis. Other drugs such as antidepressant or lithium may help.

Cognitive behavioural therapy: This type of psychotherapy can help people with certain mental health conditions that can cause psychosis or make it worse. The individual behaviour is been modify by changing the negative thought that may increase the disorder. It is most common in the treatment of anxiety and depression but can also be use for the treatment other mental and physical health problems such as schizophrenia, psychosis, posttraumatic stress disorder and eating disorder

Dialectical Behaviour therapy: This is a type of talking therapy that helps people learn skill to manage difficult emotions and make positive changes in their lives. It is an evidence based psychotherapy that began with effort to treat personality disorder and interpersonal conflict. It is also a modified type of cognitive behavioural therapy that its main goal is to teach people how to live in the moment, develop healthy ways to cope with stress , regulate their emotions and improve their relationships with others

Substance use disorder: This is a treatment programme prepare for substance use disorder usually often to individual, group or family. This programme focus on understanding the nature of addiction, becoming drug free and preventing relapse levels of care and setting different need depending on the individual need such as outpatient, residential and inpatient

Inpatient treatment: Patient with severe cases of psychosis especially when it poses danger to themselves and others, such patient will be admitted in the hospital or specialist facilities for treatment.

Support programme: In treating people who are experiencing psychosis with other medical health condition such as alcohol or substance used disorder, support program can reduce the impact of the psychosis and related conditions. This programme can also make it easily to manage people with psychosis and underlying conditions.

Motivational enhancement therapy: This is a short term technique used in the treatment of alcohol and substance used disorders. This approach focus on helping people to feel more motivated to change their destructive harmful behaviour. It integrates the aspect of motivational and interview. Motivational interview is the counselling approach that helps people resolves ambivalence and encourage improves motivation to change. It helps people become willingly, confident and ready to change. It can also help clients explore coping strategies and encourage commitment to making a change. Motivational enhancement therapy has the following goals:

Express empathy: This involve helping people develop and express empathy for others. The goal is to understand how their own behaviour affect other people

Acknowledge discrepancy: This recognizing that there is discrepancy between person's desire place to be and where they actually are.

Avoid argument: Therapist do not made argument with an individual about their behaviour about substance use.

Accept resistance and look for the way to diffuse the struggle. The goal is to reduce the resistance.

Support self-efficacy: In order to make a change people need to believe that they are capable of achieving their goal.

Contingency management: This is a treatment plan that gives immediate reward for a desire change in behaviour. It is based on the principle that if a good behaviour is rewarded , it is likely to be repeated again

Assertive community treatment: This is a program for people with severe mental health conditions like schizophrenia spectrum disorder. A-team of specialists which comprise of Clinical psychologist, Psychiatrists, social workers, dual diagnosis, case manager and registered nurse will offer a range of home base and support service treatment

How to prevent substance abuse and drug addiction

- Strictly follow the doctor's prescription of medications
- Abstinence from substance abuse
- Do not share your drug prescription with any person
- Wear safety equipment.

- Treat all infections especially those that may affect your eyes and ears that may spread to your brain and cause psychosis.
- Eat balance diet and maintain a healthy weight.
- Healthy weight can reduce many medical health conditions that related to the circulation of the heart that may prevent stroke and similar medical health conditions usually put an individual at risk of developing psychosis.

Regular Medical Check-up

Regular medical check-up play an essential role in the health care. Regular medical check-up is defined as a routine health care process for both genders and for all age groups at different periods according to the patient risk factors (Al-Kahil, Khawaja, Kadri, Abbarh, Allhras & Jaganath, 2020). Regular medical check-up refer to physical examination which offer an individual variety of tests dependent on the age and sex and health of the person.

Important of Regular medical check-up

Early detection of health issues: Regular medical check-up is like a health status card. This help to detect the potential health issues at the earliest stage that an individual could possibly managed stage.

Prevention is better than cure: The old adage prevention is better than cure hold true in the work of health care. Regular medical chec k-up provide the opportunity for health care professional to assess the individual risk factors and offer guideline on lifestyles changes that can help prevent various diseases and mental disorders.

Monitoring chronic conditions: For those already living with chronic health conditions such as hypertension, heart diseases, psychosis, depression disorders, and regular medical check-up is very important. It allows the health care professional to monitor the progress, adjustment treatment plan and prevent complications.

Immunization and vaccination: This is the most critical part of preventive health care. Regular medical check-up ensure that you are up-to-date on essential immunization that may prevent you from many diseases and mental disorders associated with substance use or drug addiction. This p[particularly for children, elderly and the individual s with compromised immune system.

Establishing a baseline for health: Regular medical check-up help to establish a baseline for the people. This includes vital track sign, blood pressures, cholesterol level and other health indictors.

Reduce health cost: regular medical check-up help to reduce health care cost in the long run. Early detection and prevention can save people from expensive treatment, hospitalization and medication that may require if the conditions go undetected.

Promoting peace of mind: knowing that you are actually taking steps to monitor and maintain your health can bring peace of mind. It can also provide reassurance that you are doing your best to stay healthy and address any concern promptly

Setting a good example: An individual commitment to regular check-up can serve as a positive good example to friends, family and loves ones by encouraging them to prioritise their health can have a ripple effort creating a culture of wellness within the community.

Conclusion

Psycho-education is very important for the general population, both male and female, young or old alive to armed themselves with this information or knowledge to take realistic decision and care on how to prevent themselves from been affected with any medical conditions or mental disorders due to substance abuse and drug addiction. It is obvious that the knowledge of substance abuse, drug addiction and regular medical check-up is lacking or limited in the society, organizations, government and private sectors because people do not viewed substance abuse and drug addiction as a disease model. This made them not to take realistic decision concerning their lifestyle, risk factors and preventive measures. Clinical psychologists and other clinicians are important to psycheducate the Nigeria population on knowledge of regular medical check-up to ascertain their health status or detect any abnormality in their neurotransmitters which may lead to medical conditions or mental disorders

Recommendations

The government and the management of health institutions at various levels should psychoeducate Nigeria population on knowledge of substance abuse, drug addiction and regular medical check -up to avail them the opportunity for regular medical check-up to

ascertain their health status and avert any medical health conditions or mental disorders which may result from individual consumptions of substance abuse and drug addiction.

The Government and philanthropist should provide drug screening machines at every primary health care centre, general hospital and tertiary hospital to enable the individual screen themselves and ascertain the contain of drug in their system. This can help them take realistic decision whether to offer themselves for treatment or not.

The government should subsidize the cost of screening and drugs for people with mental disorders to enable them access treatment when the need arise.

Government should build more psychiatric hospitals and rehabilitation centres across the country to accommodate patients with psychiatric

Clinical psychologists and other clinicians should psycheducate the people on the etiology, risk factors, treatment and the important of regular medical check-up.

References

- Abiola, O.O (2010). Adolescent: Handle with care, Hanijam publications editing consultants and publishers, Ist floor, Bakori house A3, Ahmadu Bello Way, Kaduna
- Al-Kahil, A.B., Khawaja, R.A., Kadri, A.Y., Abbarh, MBBS, S.M., Allhras, JT., Jaganath, P.P. (2020). Knowledge and practices towards routine medical check-up among middle aged and elderly people of Riyadh. *Journal of patient experience*, 7 (6) 1310-1315
- America Psychological Diagnostic and Statistical manual of Psychological disorder
- Bandura, A. (1969). Principle of Behaviours Modification. NewYork: Holt, Rhinehart and Winston
- Bledsoe, S. E. & Tully, R. J. (2019). Psychoeducation in Mental Health: Implications for Clinical Practice. *American Journal of Psychiatry*, 176(12), 1012-1018.
- Chien, W. T., Chan, S. W. C., & Wong, M. K. (2013). An Exploratory Study of the Effects of Psychoeducation on Patients with Schizophrenia. *Psychiatric Services*, 64(2), 102-107.
- Corrigan, P. W., & Watson, A. C. (2002). Understanding the impact of stigma on people with mental illness. *World Psychiatry*, 1(16), 16-20.
- Friedberg, R. D., & Friedberg, B. (2012). Psychoeducation for Families: A Practical Guide. *Clinical Psychology Review*, 32(1), 81-88.
- Goodwin, D.W. (1985). Alcoholism and alcoholotic psychoses. In Kaplanhi Sadock, BJ *Edition comprehensive text book of psychiatry*, 4ediction Baltimoc, Williams and Wilkins.

- Gonzalez, J. M., et al. (2018). Family psychoeducation for mental health conditions: Review and recommendations. *Family Process*, 57(1), 30-47.
- Halgin, R.P. & Whitbourne, S.K.(2000). Abnormal psychology: Clinical perspective on Psychological disorder. New York: McGraw Hill.
- Idowu, A.I. & Abolarin, E.E. (1996). Incidence causes and patterns of drug abuse in Nigeria. In E.O Obe (ed). School indiscipline and Remedies. Lagos: Premier press and publishers.
- Kendra, C.M (2023). What is motivational enhancement therapy. Medically review By Steven Gan. Medical director.
- Kopelowicz, A., Liberman, R. P., & Wallace, C. J. (2006). The effectiveness of psychoeducation in the rehabilitation of schizophrenia. *Clinical Psychology Review*, 26(3), 347-364
- Lindsay, A., Redd, R. D., & Swanson, J. W. (2014). The effectiveness and efficacy of family psychoeducation for the prevention of relapse in schizophrenia. *Psychological Medicine*, 44(11), 2249-2260.
- Maugh, T.H., Marihuana (1985). The grass may no longer greener. *Science*, 185, 683-685
- Mental Health atlas, encourage improves motivation to change.2020. Geneva: World Health Organization, 2021
- Michelle, R.Liw, R, Lisw, S, Rajy, A. (2023). What is psychoeducation and why is it Important, *medical review*.
- Miklowitz, D. J., Porta, G., Martínez-Álvarez, M., et al. (2007). Family-focused treatment for adolescents with bipolar disorder: A randomized controlled trial. *Journal of the American Academy of Child & Adolescent Psychiatry*, 46(10), 1349-1356.
- National Institute on Drug Abuse. (2021). Is drug addiction a disease? <https://www.drugabuse.gov/publications/media-guide/science-addiction>
- National Institute on drug abuse, advancing science 2011
- National Institute on drug abuse, advancing science 1999
- New paper report Tina Akannam 14th November 2008
- Richter, R.W. (1975). Chincopharmacological aspect of mind altering and addictive drugs. In medical aspect of drugs abuse. New York: Harper & Row
- Rosenberg, B. L., Wong, S., & Heckman, A. (2010). Cultural competence in psychoeducation: Evolving strategies for diverse populations. *Cultural Diversity and Ethnic Minority Psychology*, 16(4), 489-494.
- United Nations Office on Drugs and Crime. (2021). World Drug Report 2021. <https://www.unodc.org/unodc/en/data-and-analysis/wdr2021.html>
- Wills, J. (1973). Addicts: Drugs and Alcohol Re-examined. New York: Pitman Publishing
- World drug 2016
- World Health Organization. (2021). Substance Abuse. (https://www.who.int/substance_abuse/en/)
- World Health Organization. (2004). Technical Report series. Geneva: Author
- World Health Organization Africa, afro.who.int/health