Bibliotherapy as a panacea for drug abuse and addiction: The case of Teen Challenge, Jos, Plateau State, Nigeria

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Abstract
Bibliotherapy is the use of books for healing sicknesses such as mental illness, emotional disturbance and depression. Such illnesses could be caused by drug abuse which is the use of drugs in ways one should not. Most people abuse drugs to feel good, ease stress or avoid reality. Bibliotherapy is attached to factors such as drug abuse and addiction. Preliminary investigation, coupled with personal experience, showed that selected books can serve as therapy for clients who are drug addicts. The purpose of the study was to investigate the influence of bibliotherapy as a panacea for drug abuse and addiction in Nigeria. The research adopted the survey design. The study population was made up of students of Teen Challenge, who are drug addicts that are housed at No. 74, Liberty Boulevard Gwarandok, Jos, Plateau State. Total enumeration was used for the respondents and the instrument for this research was questionnaire. The data collected were analysed using frequency counts and percentages. A total of 20 copies of questionnaire were administered to the drugs addicts and the 20 copies, representing (100%) were retrieved. The findings showed that all of the drugs addicts were males and they fall between the age range of 21-25 and the substances mostly abused were Indian hemp and alcohol, most of the respondents stopped the addiction through reading spiritual books. The study recommended that relevant reading materials should be made available to the drug addicts in order to help them become virtuous. However, there is the need to engage the youth in skills acquisitions and self-development in order to be productive.

Keywords: Drug abuse, Drug addiction, Bibliotherapy, Panacea. Teen Challenge, Nigeria

Introduction
Bibliotherapy is using books to aid people in solving the issues that they may be facing at a particular time. It consists of selecting reading material relevant to client's life situation. The Online dictionary for library and information science (2011) defined bibliotherapy as the use of books selected on the basis of content in a planned reading program designed to facilitate the recovery of patients suffering.
from mental illness or emotional disturbance. Ideally, the process occurs in three phases: personal identification of the reader with a particular character in the recommended work, resulting in psychological catharsis, which leads to rational insight concerning the relevance of the solution suggested in the text to the reader's own experience.

Bibliotherapy is also a process of interaction between the personality of the reader and imaginative literature which may engage his emotions and free them for conscious and productive uses (Cronje, 1994).

Bibliotherapy can be considered in medical, psychiatric, educational and rehabilitation environments. It is mostly used in the hospitals and it is a therapeutic measure that can be applied in the treatment of patients with medical, psychological and social problems.

1. **Bibliotherapy in psychiatric environment**: The type of clients treated here are the neurotic, manic-depressive, alcoholics, and drug addicts. Despite the fact that many may not be able to express themselves clearly, bibliotherapy can still be used with books, newspaper articles, radio and television programmes, films, slides, music, followed by a discussion.

2. **Bibliotherapy in educational setting**: Books can play an important part. An attractive school library or media centre is a vital aid to bibliotherapy in this area. Educationists and bibliotherapists can work together with pupils, students, adolescents, and persons with problems in the school community. Corrective and preventive bibliotherapy is useful here because books must be well chosen and carefully analyzed. One of the ways in which such guidance can be given is through suggestions for reading in which the child may receive mental and emotional therapy through identification with a character in a book who faced a problem or situation.

3. In **rehabilitation setting**, the bibliotherapists and librarians consider prisoners, alcoholics, drug addicts, the mentally retarded by providing materials that will help them build self-confident and self-respect.

**Causes of drug abuse**

Haladu (2003) gave the following as the main causes of drug abuse and addiction:

i. **Experimental curiosity**: Curiosity to experiment the unknown facts about drugs thus motivates adolescents into drug use. The first experience in drug abuse produces a state of arousal such as happiness and pleasure which in turn motivate them to continue.

ii. **Peer group influence**: Peer pressure plays a major role in influencing many adolescents into drug abuse. This is because peer pressure is a fact of teenage and youth life. As they try to depend less on parents, they show more dependency on their friends. In Nigeria, as in other parts of the world, one may not enjoy the company of others unless he conforms to their norms.

iii. **Lack of parental supervision**: Many parents have no time to supervise their sons and daughters. Some parents have little or no interaction with family members, while others put pressure on their children to pass exams or perform better in their studies. These phenomena initialize and increases drug abuse.
iv. **Personality problems due to socio-economic conditions:** Adolescents with personality problems arising from social conditions have been found to abuse drugs. The social and economic status of most Nigerians is below average. Poverty is widespread, broken homes and unemployment is on the increase, therefore our youths roam the streets looking for employment or resort to begging. These situations have been aggravated by lack of skills, opportunities for training and retraining and lack of committed action to promote job creation by private and community entrepreneurs. Frustration arising from these problems lead to recourse in drug abuse for temporarily removing the tension and problems arising from it.

v. **The need for energy to work for long hours:** The increasing economic deterioration that leads to poverty and disempowerment of the people has driven many parents to send their children out in search of a means of earning something for contribution to family income. These children engage in hawking, bus conducting, head loading, scavenging, serving in food canteens etc and are prone to drug taking so as to gain more energy to work for long hours.

vi. **Availability of the drugs:** In many countries, drugs have dropped in prices as supplies have increased.

vii. **The need to prevent the occurrence of withdrawal symptoms:** If a drug is stopped, the user experiences what is termed “withdrawal symptoms”. Pain, anxiety, excessive sweating and shaking characterize such symptoms. The inability of the drug user to tolerate the symptoms motivates him to continue (Ige, 2000).

**The effects of drug abuse**

Mba (2008) as cited in Fareo (2012) identified numerous negative effects of drug abuse on the body chemistry as follows:

i. **Alcohol-related problems includes:**
   a. Physical problems, e.g. liver cirrhosis, pancreatic, peptic ulcer, tuberculosis, hypertension, neurological disorder.
   b. Mental retardation for the fetus in the womb, growth, deficiency, delayed motor development.
   c. Craniofacial abnormalities, limbs abnormalities and cardiac deficits.
   d. Psychiatric e.g. pathological drunkenness, suicidal behaviour.

ii. **Tobacco:** Causes stimulation of heart and narrowing of blood vessels, producing hypertension, headache, loss of appetite, nausea and delayed growth of the fetus. It also aggravates or causes sinusitis, bronchitis, cancer, strokes, and heart attack.

iii. **Stimulants:** Lethargy, irritability, exaggerated self-confidence, damage nose linings, sleeplessness, and psychiatric complications.

iv. **Inhalants:** Causes anemia, damage kidney and stomach bleeding.

v. **Narcotics:** Causes poor perception, constipation, cough, suppression, vomiting, drowsiness and sleep, unconsciousness and death.

**History of Teens Challenge**

Teen Challenge was established on February 28th, 1958 by David Wilkerson in New York City with a burning message from God to share with youth gangs, desperately needing to hear it. From his
experience working with gang members, David Wilkerson was able to observe the horrible destruction drug addiction inflict on young people’s lives. Teen Challenge has grown to one of the largest and most successful drug and alcohol programmes in the world. Today, there are 250 centres in the USA, and over 1,400 programs internationally in 110 counties. Teen Challenge helps those who have life-controlling, and substance abuse problems.

Teen Challenge was established in Nigeria by Pastor David Omih, who is presently the Executive Director of Teen Challenge Nigeria in October 14, 2013. He has had his own share of addiction while in USA. He was introduced to marijuana in college, he smoked crack and cocaine, and spent all his money to sustain his addiction. He gave his life to Christ on September 10th, 1999 and came in contact with Teen Challenge Milwaukee, Wisconsin where he completed his first four months, then moved to Pennsylvania for the second phase of the programme and graduated on 1st September, 2000. He then served as an intern at the Teen Challenge Michigan, returned to New Orleans just before hurricane Katrina. Graduated from Teen Challenge Ministry Institute (TCMI) in 2007 (Bicknese, 1999).

Teen Challenge Nigeria is a Faith-Based Organization that relies on donation to maintain the mission to restore broken lives. Often, those who need help are least able to have the financial resources to support themselves through the program. The organisation raises fund to provide her students the opportunity to enrol in the program without regard to age, race, religion or economic status. Majority of the funds are raised from individuals, churches, businesses, communities, organizations and fund-raising events. Individuals can sponsor a student monthly and local business and individuals can become partners by giving a monthly contribution to Teen Challenge Nigeria. Some of the graduates of Teen Challenge Nigeria are presently students of Evangelical Church Winning All (ECWA) Theological Seminary (JETS) Jos, Plateau State, Nigeria.

Teen Challenge is a 12-month residential programme for hurting young men and women, 16 years and older caught in the vicious cycle of drug and alcohol abuse and other life-controlling problems. The mission of Teen challenge is to help drug addicts become mentally sound, emotionally balanced, socially adjusted, physically well and spiritually alive. Teen challenge philosophy is that God can provide a total cure for the whole person.

The stages of Teen Challenge are as follows:

- Crisis intervention: In this phase men and women come in crisis and tutored to withdraw from alcohol, drug abuse and addiction
- Induction restoration: Students are introduced to Teen Challenge curriculum, personal and group counselling as they learn to live with others in love.
- Training development: Students’ are introduced to character studies, life skills, Bible training and vocational training.
- Re-entry development: At the completion of the programme, graduates are allowed serving an internship as group leaders, continuing their education and seek employment.

Statement of the problem

Bibliotherapy is the use of books selected on the basis of content in a planned reading programme designed to facilitate the recovery of patients suffering from mental illness or emotional disturbance. Ideally, the process occurs in three phases ((1) identification, (2) catharsis, and (3) insight: personal identification of the reader with a particular character in the recommended work, resulting in psychological catharsis, which leads to
rational insight concerning the relevance of the solution suggested in the text to the reader's own experience. Assistance of a trained psychotherapist is advised. Online Dictionary for Library and Information Science (2011) Preliminary investigation, coupled with personal experience, showed that alcoholism, drug abuse and addiction can lead to mental illness and emotional disturbance. Personal observations and experience have shown that selected books can serve as therapy for clients who are drug addicts. However, there is dearth of literature on the extent to which bibliotherapy serves as a panacea for alcoholism, drug abuse and addiction in Nigeria. Thus, this study sought to determine the influence of bibliotherapy as a panacea for drug abuse and addiction in Nigeria.

**Objectives of the study**
The main objective of this study was to determine the influence of bibliotherapy as a panacea for drug abuse and addiction in Nigeria. The specific objectives are to:

1. determine the qualification of the drug addicts
2. examine the drug that is mostly abused in Nigeria
3. find out how long they have been taking drugs
4. Ascertain the types of books they read that make them stop addiction

**Research questions**
This study sought answers to the following research questions:

1. What are the qualifications of the drug addicts?
2. What are the drugs that is mostly abused in Nigeria?
3. How long have been taking drugs?
4. What types of books do they read that make them stop addiction?

**Scope of the study**
The focus of this study is to ascertain the influence of bibliotherapy a panacea for drug abuse and addiction: a case study of Teen Challenge Jos, Plateau State, Nigeria. The study was conducted among students of Teen Challenge Jos, who were drug addicts. The students were housed in the same building and were being attended to in terms of study and vocation.

**Significance of the study**
This research is worthwhile because it would provide the theoretical and empirical evidence on how bibliotherapy serves as a panacea for drug abuse and addiction in Nigeria. The research would serve as a reference document for other researchers whose interest lies in bibliotherapy as a panacea for drug abuse and addiction. It is expected that the findings of this study would benefits health workers, education policy making bodies such as the government and the law makers as well as scholars in the field of librarianship and bibliotherapist in providing the right materials to the victims.

**Methods**
The research adopted the survey design. The study population was made up of students of Teen Challenge Jos, who were drug addicts. Total enumerations were used for the respondents because they were only 20 in number and were housed in the same hostel. The instrument for this research was the questionnaire and the data collected were analysed using frequency counts and percentages. Twenty (20) copies of questionnaire were administered to the drug addicts and the 20 copies, representing (100%) were retrieved at an agreed time between the researcher and the respondents.

**Findings of the study**
The findings of this study are presented in this section.

Figure 1 reveals that most of the respondents fall within the age categories of 21-25 and 36-40 years with 5 respondents each which represent 25%. It was followed by 16-20 and 31-35 with
four (4) respondents each representing 20%. Then followed by ages 26-30 with 2 respondents representing 10% each.

Figure 2 shows that all the respondents were males; this is because there were no females in teen challenge as at the time that this research was conducted.

Figure 3 shows that most of the respondents have SSCE certificates with 11 respondents representing 55%. It was closely followed by those with OND/ND with 4 respondents, representing 20%. Then followed by respondents with HND/BSC, NCE, and Masters Degrees. This result reveals that most of the drug addicts were SSCE holders.

Figure 4 shows the distribution of respondents according to their geopolitical zones. It reveals that the North-Central geopolitical zone has the highest with 9 (45%) respondents. It was followed by the North East with 3 (15%) respondents, which was followed by South-West, South–East, and South-South with 2 respondents each, representing (10%) and North-West has the lowest with 1 (5%) respondent. The result reveals that most of the respondents were from the North-Central geopolitical zone. This could be due to the fact that the Teen Challenge investigated is located in this zone.

Figure 5 reveals the type of substance abused. It shows that most respondents abuse Indian hemp and alcohol with 18 respondents, representing 90% while 2 respondents abuse tramadol representing 10%.

Figure 6 reveals that most of the respondents - 19 (95%) - were introduce to drugs and alcohol by friends followed by neighbours with 1 respondents, representing 5%.

Figure 7 shows that 10 (50%) respondents were introduced to drug abuse at the age range of 10-15. It was followed by 16-20 years with 8 (40%) respondents, the 21-25 and 26-30 years with 5% each.

![Figure 1: Age of the respondents](image-url)
Figure 2: Sex of the respondents

Figure 3: Educational qualifications of respondents
Figure 4: geopolitical zones of respondents

Figure 5: Types of substance abused
Figure 6: Who introduced drugs/alcohol the respondents

Figure 7: Age respondents were introduced to drugs abuse
Figure 8: Where respondents were introduced to the substance

Figure 8 reveals the level that the respondents were introduced to the substance. A total of 14 respondents, representing 70% attested to the fact that they were introduced to drugs at secondary school levels. It was followed by tertiary institution and neighbourhood with 3 respondents representing 15% each.

Figure 9 shows how long the victims have been taking the substance. The highest respondents were those that have been taking the substance for between 11-15 years, they were 6(30%), followed by 6-10years and 16-20years with (25%); 20% responded that they have been taking the drugs for between 1-5years.

Figure 10 reveals how the respondents stop addiction. 20 respondents representing (100%) were of the view that they were able to stop drug addiction through preaching, teaching and the use of Christian related literature.

Figure 11 shows the consequences and implication of drug abuse on the clients and their families. 16 respondents representing (80%) responded that it has physical effect on them. It was followed by 3 respondents representing (15%) who responded that it has psychological effects on them and (5%) is for social effects.

Figure 12 the type of books they read that contributed to their stoppage of addiction. 20 respondents representing 100% attested that they read the Bible and Christian related literature (spiritual books).

Figure 13 shows that 19 respondents representing 95% were of the view that they will never go back to drugs again while 1 respondent representing 5% was not sure of himself.
Figure 9: How long ago the respondents have been taking the substance (drug)

Figure 10: How the respondents stopped the addiction
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Figure 11: The consequences and implication of drug abuse on their families

Figure 12: Type of books read that contributed to stoppage of addiction
Conclusion
The findings concluded that for bibliotherapy to be effective it must begin early at the first sign of an emerging problem. It also reveals that most of the respondents are young adult addicted to drugs and most of them indulge in Indian hemp and alcoholism. The study also reveals that the respondent affirmed to be reading Christian literatures. Finally, majority of the respondents are of the view that they would not go back to drug abuse again.

The study recommended the followings;

i. There is need to engage the youth in skills acquisitions and self development in order to make productive.

ii. Government at every levels should enforce the laws on drug abuse to discourage youth from the use of illegal drugs.

iii. Efforts should be geared towards disabusing the minds of the youth against drug abuse.

iv. Sensitization on drug abuse should be provided at every level.

v. Counseling on drug abuse should be provided to drug addicts in order to rehabilitate them.

vi. Various readings materials should be made available to the victims in order to help emulate good virtue.

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