

Original article

School and Home Influence on Alcohol Consumption Among School Children in Nigeria

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Received: 19-4-2019

Revised: 2-6-2019

Published: 27-6-2019

Keywords:

Alcohol, cultural norms/festivity, family, school, peer-pressure

Abstract: The purpose of the study is to ascertain if school variable (peer group pressure) and home variables (family history of alcohol consumption, socio-economic status of the family, attitude of parent towards alcohol drinking and cultural norms/festivity) lead to alcohol consumption among adolescents and proffer solution to the social menace of alcohol consumption among secondary school children. The study was a descriptive research design with mixed methods of data collection involving questionnaire and interview schedule. A sample of 100 students out of a population of 130 students and 180 students each of the mid-class (SS 2 and JS 2) of the senior and basic secondary schools respectively were involved in the study. Four hypotheses were posited and tested using Chi-square and statistical decisions made. The instruments for the study were questionnaire and interview schedule with a reliability coefficient of 0.78 using Pearson Moment Correlation Coefficient. It was found that parents are the major source of alcohol supply for many young Nigerians and children are often first introduced to alcohol in the family - home. Parents who drink alcohol are more likely to exhibit permissiveness towards alcohol use in their adolescent children. Based on the findings from this study, it could be concluded that children aged 10-16 years in Yenagoa metropolis of Nigeria, indulged in alcohol consumption regularly and in high quantity which is not good for their health. It is necessary that parents should present themselves as suitable role models in – order to guide their children against anti-social behaviours.

Cite this article as Joy-Telu, H-E and Moses, J.B. (2019). School and Home Influence on Alcohol Consumption Among School Children in Nigeria. *Journal of basic and applied Research in Biomedicine*, 5(1): 1-7



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INTRODUCTION

Alcohol-use early in life is one of the relevant predictive factors of future health, socio-cultural and economic problem and alcohol consumption before the age of 16years significantly increases the risk of excessive drinking in adulthood of both sexes (Alati and Najman, 2005); adolescents comprises the group that has the greatest alcohol consumption problem. Alati and Najman (2005) in their study showed that even low consumption is associated with greater risk of accidents, in the long term, alcohol beverages consumption can lead to suicide and chronic diseases such as mental disorder, cancer, systemic arterial hypertension, obesity and digestive neoplasias. Chauerji and Simone (2005) in their study showed that alcohol use during adolescent-age affect educational attainment by increasing the number of schooling and the unlikely hood of completing school. Chattterji and Simone (2005) further reported that adolescent have identified the following factors that is associated to the use of alcohol, and the factors

are age, sex, economic status, studying in public schools, not living with parents, family history of alcohol, entering the job market, religion and association with family behaviour toward alcohol use.

Jacob (2012) suggested that alcohol is the most available drink and it is commonly used by adolescents, it contains various substances that are dangerous to health and it is the number one risk health behaviour of adolescents. One in four individuals between the ages of 12 - 20 drinks alcohol on a monthly basis, and a similar proportion of the 12th grades consumes alcoholic drinks in row at least once every week (Newest, Chen, Williams and Faden 2007). Alcohol is regarded as a dangerous drug which can lead to addiction (Sanusi, 2004). Agala (2006) observed that the menace of alcohol and its miss-use dated back to when the early men relied on fruits, leaves, plants tubers and animal for food; from these foods, various forms of alcohols were derived. Marchie

and Nnamdi (2003) in their study, stated that the first discovered drug substance referring to the western literature is alcohol and this exerts a major influence on the brain resulting in a psychological change in mode or behaviour. Alcohol is a psychoactive substance possessing habits forming potential, and that man had used alcohol since its discovery. Marchie and Nnamdi (2003) stated that students who are alcohol addicts suffer mental deterioration and are consequently found wanting in their academic excellence. If this condition is not curbed in them, they may become ruined and the hope of their family or the community on them will be shattered. However, Iwueke (2003) stated that the art of drinking and getting drunk drastically affect the brain and sense of reasoning.

Nutt, King and Phillips (2010) observed that despite the fact that alcohol is a harmful drug to the individual as well as the society, it is part of the cultures as an aspect of everyday life and as an aspect of a variety of social situation. Alcohol is integrated in such a way that literature (Balor, Caetario, Casswell, Edwards, Giesbrecht and Grahamk, 2003) even speak of the term alcohol culture, which is the norms about the use of alcohol in culture and the relationship of drinking to other aspects of culture. When it comes to consuming alcohol, social norms are among the strongest predictor of alcohol use. Kypri and Longley (2003) suggested that the theory on social norms explains the influence of social norms and approach. It is a theory that states, that the human behaviour is influenced by incorrect perceptions of what other members of our own social group think and act, alcohol consumption among adolescents, means that cultures towards alcohol are more permissive than expected and that they assume that other adolescents consume more than what they really consume.

Despite a growing literature (Iwueke, 2003; Sanusi, 2004; Newest, Chen, Williams and Faden 2007; Jacob, 2012) in this area no study has convincingly answered question whether alcohol consumption inhabits secondary school students learning. The long-term administration conditions reflect physiological and histopathological characteristics probably such as cases of alcohol addictions (Khleifat et al., 2002; Homady et al., 2002a; Homady et al., 2002b; Khleifat et al., 2006; Qaralleh et al., 2009). Alcohol consumption could be an important determinant of how much secondary school students learn without having strong impact on his or her decision of staying in school. The reason why youths consume alcohol is because it gives them the motive to take whatever action they want to why some of them take alcohol to relief them from pain and stress such as emotional pain and frustration, to make them feel

measured meaning that they have reached the stage of doing things on their own without consulting the opinion of their parents or guidance (Amy, 2005; Balor, Caetario, Casswell, Edwards, Giesbrecht and Grahamk, 2003; Ajala, 2006). Ajala (2006) and Amy (2005) advised that it is necessary to probe into the factors responsible for youth alcohol consumption so as to know the ways and methods as well as why they indulge in it which include:

- **Timidity:** Today many people find it difficult to bring or develop themselves up to meeting and talking to a mammoth crowd, instead they indulge in the use of alcohol in order to raise their moral and dissipate the fear in order to enhance their performance;
- **Anxiety:** the concern of ambition and how to achieve their ambition have driven many youths especially teens into the use of alcohol. Many of these teens and youths fall into the category of armed robbery and assassins;
- **Popularity:** forty-two percent of teenagers agreed that television shows make them to feel that alcohol seem like a right thing to do. Surprisingly, 12-16 years old who watched "R" related movies (restricted movies) per month were five times more likely to drink alcohol compared to those who have not watched "R" related films (Amy, 2005);
- **Escape and self medication:** When teens are unhappy and cannot find a healthy outlet for their frustration or a trusted confidant, they turn to alcohol for solace (Amy, 2005)
- **Lack of confidence:** many teens who lack confidence report that, they do things under the influence of alcohol so that they might not make mistake otherwise they will be shy (Amy, 2005).

Statement of problem

From the literatures discussed above, it can be seen that alcohol is a powerful non-prescription drug and can have unpleasant side effect. Also it shows that the use of it by adolescents is getting high of which the adolescent do not understand the risk they venture into because they believed it to be a key rite for passing from childhood to adulthood, Alcohol use at an early stage of life can also be a factor of health and its related problems in adulthood. Alcohol is also responsible for death and disorder in some cases in the person's life. Alcohol also affects quality learning and academic performance of a student by increasing the number of schooling years, under-age, drinking can have an impact on both getting admission into higher institution and getting quality job. A lot of factors have led to school dropout of many students mostly individual consumption of alcohol, family history of alcohol consumption, socio-economic status of the family, attitude of parent towards alcohol drinking and peer pressure; this study specifically wants to investigate the above listed factors

grouped into school and home factors that can influence adolescents' consumption of alcohol.

Purpose of the study

The purpose of this study is to know if parents, family history of alcohol consumption and traditional belief about alcohol consumption which are home factors and peer group pressure which is considered as a school factor, lead to alcohol consumption of the adolescent and to proffer solution to alcohol consumption among secondary school students.

Research Questions

The following research questions were posited for this study:

- Does parent's consumption of alcohol tend to their children consumption of alcohol?
- Does family history of alcohol consumption lead to alcohol consumption of the adolescent?
- Does traditional believe lead to alcohol consumption?
- Does peer-group pressure lead to alcohol consumption of the adolescent?

Hypotheses

The following hypotheses were derived from the research questions:

1. There is no significant relationship between parent alcohol consumption and the adolescent alcohol consumption.
2. There is no significant relationship between family history of alcohol consumption and adolescent alcohol consumption.
3. There is no significant relationship between traditional belief and in- school adolescent alcohol consumption.
4. There is no significant relationship between peer group pressure and in-school adolescent alcohol consumption.

METHODOLOGY

The study involved two secondary schools in Yenagoa local government area of Bayelsa state, Nigeria. Secondary education in Nigeria is divided into three years of basic junior secondary school and another three years of senior secondary school, one school each from this divide was involved in the study. The schools are: Eipe National High school Kpansia (Senior Secondary School) and Universal Basic Junior Secondary School Kpansia, these schools were chosen because of their centrality in the capital metropolis (Yenagoa) that allow for easy access and their willingness to be involved in the study. Consent letters detailing the research objectives and methodology of data collection were sent to the participating schools. The schools in return indicated willingness to participate in the research.

The study was a descriptive research design with mixed methods of data collection involving questionnaire and interview schedule. Interview was used to triangulate the findings from the questionnaire. A sample of 100 students out of a population of 130 students and 180 students each of the mid-class (SS 2 and JS 2) of the senior and basic secondary schools respectively were involved in the study. The instrument for the study were questionnaire and interview schedule. The questionnaire contains nineteen items and they are structure based on the purpose of the study with multiple choice variables that may cause alcohol consumption. Respondents were instructed to tick what is most appropriate. The instruments were validated by experts in measurement and evaluation whilst the questionnaire reliability was determined by using test-retest method of testing reliability. This was done by administering the instrument to small sample of 30 students not involved in the main study. The instrument was re-administered to the same sample after two weeks. Both data were collated and analysed using Spearman Rank Correlation Coefficient. A coefficient of 0.78 was realized which is within the benchmark of reliable coefficients. On the day of the administration of the instrument, the two researchers visited the selected secondary schools and distributed two hundred (200) questionnaires to the sampled students in the identified secondary schools personally, after they have completed it, the questionnaires were retrieved back from them for analysis. A face to face in-depth interview was done with selected sample (twenty) of the participating students. The intent was to triangulate the findings from the questionnaire. Although twenty persons were to be interviewed only ten persons participated.

In phenomenological study (qualitative), data emerge from rich description of phenomenon and the inquiry utilizes inductive theory development (Creswell, 2013). Though there was an interview guide questions developed through evolution of conversation with the participants. The format includes detailed orient probes, elaboration probes and clarification probes to enhance the understanding and clarity of statements as appropriate. Open-ended questions were used to obtain data from the participants. This gave the participants opportunity to express themselves to their satisfaction as regards the phenomenon under study. They express their experiences about alcohol consumption and usage through their words, actions and gesticulations. A tape recorder was used during the interview with the consent of the interviewees. Transcription software would have been used if it was accessible. In place of transcription software, the researchers did the transcription manually and compared it with audio version. Copies of participants individual

transcription was made available to participants for verification and revision suggestions to ensure validity. In order to checkmate bias, the researchers maintained bracketing during the interview data collection by isolating their own preconceived notions and beliefs; but focus on the participants so that they can understand the phenomenon from the participants own perspective to glean meaning from their experience as an interpreter. Phenomenological research focus on achieving resulting meaning and bracketing is the only way this can be achieved and checkmate bias.

Method of data analysis

The Colaizzi’s phenomenological method was used for the data analysis (Creswell, 2013). Using this method, all written transcripts were reread severally to have a holistic understanding of the participants’ experiences. From each transcript significant phrases or sentences that pertain to the lived experiences of the participants on alcohol consumption and cultural beliefs influencing the practice were identified. Meanings are then formulated from these significant phrases and statements. The formulated meanings were then clustered into themes (ideas) common to all participants’ transcripts. These themes could be presented inform of sentences or phrases. The results are then integrated into an in-depth, exhaustive description of the phenomenon. After the researchers have obtained the descriptions and themes, the final step involves the researchers approaching some participants the second time validate the findings. In this step if new relevant data emerge (but no new data emerged) the researchers will include it in the final description. Verification of the findings by the participants is the first step in achieving validity of a research project (Creswell, 2013). Validity is the outcome goal of a research work and in phenomenological study it is based on trustworthiness (Creswell, 2013). This study checked validity by using multiple methods of data collection (interview and questionnaire) to triangulate the findings. The consistency of responses from these two research

methods (quantitative and qualitative methods of data collection) ensures the credibility of the study. The statistical tool of simple percentage was used to analyze the questionnaire items in order to answer the research questions while chi – square was used to test the hypotheses. Each of the research questions were completed in tables and the statistical decisions were made.

RESULTS

The four research questions posited for this study are analysed in Tables 1 to 4 below:

Table 1 above shows that 30 (15%) students indicated that their daddy alone drink alcohol in their presence and also 32 (16%) indicated that their mummy alone drink alcohol in their presence. Thirteen of the respondents (6.5%) indicated that both parents drink alcohol in their presence making a total of seventy five out of the hundred respondents of Senior Secondary Two (SS 2) students of age 14-16years have either of their parents or both drink alcohol at home in their presence. Only 25(12.5%) indicated that none of their parents drink alcohol in presence of them. For Junior Secondary Two (JS 2), 37 (18.5%) of the students indicated that daddy alone drinks alcohol in the presence of them while 35 (17.5%) indicated that mummy alone drinks alcohol in presence of them therefore bringing the total of both parents drinking alcohol before their children to seventy-two. These findings from the questionnaire was collaborated by the findings from the interview where most interviewees explained that their both parents drink alcohol at home in their presence almost on a daily basis.

Table 2 shows family history of alcohol consumption with a similar trend of consumption of parents and grant parents. Twenty (20%) of the SS 2 participants and seventeen (6.5%) of JS 2 students indicated that both of their grandparents i.e. granddad and grandma drink alcohol, though the percent of grandparents drinking alcohol is lower than the percentage of parents.

Table 1: Parents consumption of alcohol

Questionnaire items	SS 2		JS 2	
	No of Respondents	Frequency	No of Respondents	Frequency
Daddy alone drinks alcohol in the presence of their children	30	15	36	18.5
Mummy alone drinks alcohol in presence of their children	32	16	36	17.5
Both parent drink alcohol in presence of their children	13	6.5	10	5
Non of the parents drink alcohol in presence of their children	25	12.5	18	9
Total	100	50	100	50

Table 2: Family history of alcohol consumption

Questionnaire items	SS 2		JS 2	
	No of Respondents	Frequency	No of Respondents	Frequency
Yes the both grandparents drink alcohol	20	10	13	6.5
Granddad alone drink alcohol	28	14	30	15
Grandma alone drink alcohol	35	17.5	42	21
None of them used to drink alcohol	17	8.5	15	7.5
Total	100	50	100	50

Table 3: Cultural norms/values and alcohol consumption

Questionnaire items	SS 2		JS 2	
	No of Respondents	Frequency	No of Respondents	Frequency
Local gin (kai-kai) is served during festivities	50	25	30	25
Beer is served during festivities	25	12.5	27	13.5
Alcoholic wine is served during festivities	15	7.5	37	18.5
No alcoholic drink is served during festivities	10	5	6	3
Total	100	50	100	50

Table 4: Peer group pressure and alcohol consumption

Questionnaire items	SS 2		JS 2	
	No of Respondents	Frequency	No of Respondents	Frequency
Students drink alcohol in school	34	17	23	11.5
Students drink alcohol in party	40	20	26	13
Students drink alcohol at home	15	7.5	30	15
Students who do not drink alcohol	11	5.5	21	10.5
Total	100	50	100	50

The Table 3 above shows that 50 (25%) of the sampled SS 2 respondents responded that they indulge in alcoholic drink especially the local gin called kai-kai (contain about 25% alcohol) to celebrate during traditional festive occasions. Whilst 25 (12.5%) of the students said they use beer (contains about 5% alcohol) in celebrating during festive periods. Fifteen (7.5%) of the students said they use wine to celebrate during festive periods, while 10 (5%) said they do not use any alcoholic drink to celebrate during festive periods. The percentage of respondents in the Junior Secondary school was not as high as the senior secondary school. For JS 2, the table above shows that 30 (15%) of the students use kai-kai in celebrating festive period in their community, 27 (13.5%) of them said they use beer in celebrating festive period in their community, 37 (18.5%) said they use wine to celebrate festive period in their community, while 6 (3%) of the students said they do not use alcohol to celebrate festive period in their community. Some of the interviewees stated that alcohol consumption is regarded as a cultural norm and is drunk at festivities marking the passing from childhood to adulthood. When they were asked at what age is this? The response was: ‘there

about age 10-12 years’ which is more or less the transition of childhood to adolescent not adulthood as adulthood is age 18years and above.

From Table 4 above shows that 34 (17%) of SS 2 students said they drink alcohol in school, 40 (20%) of them said they start drinking alcohol in the party, 15 (7.5%) said they start drinking alcohol at home while 11 (5.5%) of them said they have not tasted alcohol. For the junior secondary school, 23(11.5%) of the students drink alcohol in school, 26(13%) start drinking alcohol in the party, 30 (15%) said they start taken alcohol at home while (10.5%) said they have not taken alcohol. One of the themes that came through in the transcribed interview responses was ‘drinking with best friend’; most of the interviewees responded that they drink alcohol very often with their best friends after school and parties. A few admitted that they sneak alcohol from home to school to share with their friends.

DISCUSSION

Comparing both senior and junior secondary school students rate of alcohol consumption, it shows that they both nearly consume equally despite their ages

and class differences. As only ten students in JS 2 indicated that they have not taken alcohol at all. Testing the four hypotheses derived from the four research questions using Chi-square shows that the calculated chi-squares were greater than the critical values at $p \leq 0.05$ for the four hypotheses. As such the null hypotheses were rejected and the alternate hypotheses of there is significant relationship between parent alcohol consumption and the adolescent alcohol consumption; there is significant relationship between family history of alcohol consumption and adolescent alcohol consumption; there is significant relationship between traditional belief and in-school adolescent alcohol consumption; there is significant relationship between peer group pressure and in-school adolescent alcohol consumption.

Therefore there is no significant difference in term of alcohol consumption of the senior and junior secondary school students of Epie National High School Kpansia and Universal Basic School Kpansia all in Yenagoa Local Government Area of Bayelsa State, Nigeria. Findings from the interview revealed that some parents offer alcoholic drinks to their adolescent children when drinking at home as a show of love and care. In Nigeria there is no legislation prohibiting the sale of alcohol to children, a child of any age can walk to any shop and buy any quantity of alcohol and walk away without any question as long as the child has the money to pay. This has serious implications as a child can buy and drink alcohol very easily unchecked.

The findings from this study collaborated with Hamzat, Okpeze and Olaleye (2004) study which found out that the prevalence of drug and alcohol use among adolescents in Nigeria is becoming high at this present age. They defined alcohol as a potent non-prescription drug which adversely affects motor-ability, muscle function, reaction time, eyesight, depth perception and night vision. Hamzat, Okpeze and Olaleye (2004) went further to state that adolescents may not really understand the risk from smoking cigarette, drinking of alcohol and using illicit drugs. Their findings collaborated with the present study findings that participants that drink alcohol regarded it as a key rite of passing in the transition from childhood to adulthood.

Parental interaction is very important. It is also necessary that parents should present themselves as a suitable model in order to guide the adolescent against anti-social behaviour because parental role is inevitable for adolescent to develop good personality and have acceptable behaviour (Adeyemo 2004.) A family that emphasizes on getting high from legal (drinking of alcohol) or illegal substances can cause an adolescent to think

that drug used is acceptable. Unhealthy family influence may be a factor in a teen's initial drug experimentation, exposure family member for substance (drug) to cure every pain or ailment can cause a teen to do same because teens get many of their values from parents and other adult- influence and often mimic what they see. Chitty (2005) stated that family, as the cradle of life remains the primary source of support to adolescents. Parents take the basic responsibility in helping adolescent to attain a whole some development into a responsible adult. This required an atmosphere of love, happiness and understanding within the family. Part of parents' responsibilities is teaching the adolescents societal norms and values. Growing adolescents are first influenced by values beliefs and behaviour of the significant adult around them and peers.

Ajala (2006) advised that the eradication of alcohol consumption cannot be completely achieved, but can be reduced to the barest minimum level. The ways to achieve these are;

Rehabilitation: Psychological and vocational rehabilitation are essential to enable the alcohol victim fit into society once again.

Drug education: Preventive drug education should be entrenched in our primary, secondary and tertiary institution curriculum.

Drug abuse counselling: This should be carried out at all levels of the society starting from the parents and guardians. Training, workshop should be organized for counsellors to re-orient them on drug and counselling.

Hospital treatment and counselling: Many of the victims of the menace of alcohol use should be encouraged, and if necessary compelled to attend mental health institution. Detoxification, psychotherapy and counselling which are tools for treatment of victims' ailments should be carried be used. Adding to the above cited literature, education should be given to the general public on the dangers of alcohol. It should be directed especially at those who are most at risk, which are young people from age between 10-30 years. Also, parents, teachers and health educators should inform and educate children and adolescents about the dangers of alcohol consumption.

Conclusion

Based on the findings from this study, it could be concluded that adolescents in Yenagoa Local Government of Bayelsa State, Nigeria indulge in alcohol consumption which is not good for a young growing adolescent health wise. The finding also shows that parents initiate their children into alcohol consumption as they drink in front of them and also ask them to buy alcoholic drinks for them. Students should be made to realize that alcohol is not good for their health especially at the level in which they are in which their brain is still young

and continuing to develop. As it has been observed that alcohol has some health implications such as high blood pressure, loss of blood and loss of reasoning (mental health) avoidance is the best antidote to alcohol related problems. Health education teachers are needed in secondary schools and health education as a subject should also be introduced in both senior and junior secondary schools to enhance the teaching and learning of good health. Some of the objectives of health education in secondary schools as enshrined in the 'Health Education Curriculum for Secondary Schools' is to enable students acquire basic knowledge of the body and necessary skills for maintenance of health; encourage the students to acquire and practice positive health habits in the community and make students able to observe and draw inferences from practical experiences that have implications for their health.

Recommendations

Based on the findings of this study the following recommendations are made:

1. Government should legislate a ban (prohibition) of the sale of alcohol to adolescent like it is in other western nations like Britain;
2. Parents should be a role model and always show love and care to their children, they should not be taken alcohol in the presence of their children nor sent them to buy it for them;
3. Health education on alcohol should be given to the students by the ministry of education as well as ministry of health in order to make the students aware of the effect of alcohol consumption to their body.
4. Secondary schools should have counselors who will guide the students on how to solve their problems instead of masking or escaping from the problem through alcohol consumption.
5. Health education should be given to all the students to enable them know when to start drinking alcohol and the quantity they can drink.
6. Principals and Parents Teachers Association (PTA) of secondary schools should appeal to alcohol vendors near schools to disallow students from buying and drinking alcohol in their shops at any time.
7. Students living in dormitories should be properly checked especially in the night to monitor their movement in and out of the school.

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