

## **Impacts of Counseling on Disabled Persons with Substance Abuse: The Way Forward.**

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### **ABSTRACT**

Persons living with disabilities and limb-deep in substance abuse are often disdained, neglected and abandoned by society due to the ailments subsisting in them. This paper discussed the impacts of counselling on disabled persons with substance abuse. It further discussed the types, symptoms and remedies to be meted to such persons, since they are human beings and have rights to live under international laws. It concluded by suggesting ways of helping them through group counselling, where experts present their diverse approaches in an integrated matter as well as identifying and tackling early warning systems found in them.

**Keywords:** Counseling, Disabled Persons, Substance and Abuse.

### **INTRODUCTION**

Disability is an existing growth phenomenon in human development. Individuals experience one or more forms of temporary or permanent disability in their lives (Colusola, 2013). The term should not therefore, be linked to only permanent impairments experienced by certain individuals in society. This misuse has put those with extreme cases at jeopardy in their attempt to adjust to societal and cultural stigmatization. Attempts to draw attention to the existence and importance of disability in societies have been initiated by the organization of people living with disabilities at national and international levels especially, with the enactment of the enabling statute by the United Nations Convention on the Rights of Persons with Disabilities (CRPD) (WHO, 2012).

Disability is the umbrella signature for impairments, activity limitations and participation restrictions between individuals and their environmental barriers that hinder their full and effective participation in society on an equal basis with others. The World Health Organisation (WHO, 2001) identifies disability to involve impairment (problems in body functions or alternations in body structure), activity limitations (difficulties in executing activities) and participation restriction (problems with involvement in any area of life).

Raising awareness and challenging negative attitudes are often steps towards creating more accessible environment for persons with disabilities, especially where negative imagery and language, stereotyping and stigma persist for them. Disability is sometimes equated with incapacity to meet up societal standards through the inability of persons to measure up to the accepted norms. A review of health-related stigma found that the impact was remarkably similar in the different countries examined to the extent that people with such conditions face discrimination even in healthcare facilities (Van-Brakel, 2006). These wrong signals or treatments often result in negative attitude meted to the persons with disabilities. For instance, children bullying other children with disabilities at home and school; public buildings failing to provide access needs of staff with disabilities, and strangers mocking them.

Negative attitudes and behaviours have adverse effects on children and adults with disabilities, often leading to negative consequences such as low self-esteem, self-efficacy and reduced participation. People

taunted due to their disabilities may avoid going to places, attending to public functions and changing their abodes in order to escape stigmatization and molestation (Scott and Disability Commission, 2004). Persons with disabilities have diverse personal factors with differences in gender, age, socioeconomic status and ethnicity. For instance, women with disabilities may experience the combined disadvantages associated with gender as well as disability, they may less likely marry than non-disabled women (Roulstone & Barnes, 2005).

### **Substance Abuse**

Substance abuse also called drug abuse is a condition when a person takes drugs that are not legal or when they are taken out of proportion resulting in bodily harms. There is a distinction between substance abuse and addiction. While persons in the former can quit or change their unhealthy behaviours, the latter is a disease which cannot be stopped.

### **Signs of Substance Abuse**

The resultant tendency of taking substance over-dose over time is the need for more of it in order to get the same feeling or effect, which can lead to addiction. Some common signs of substance abuse are:

- i. lack of interest in a person's daily routine;
- ii. changing friends or peers so often;
- iii. stop taking good care of oneself;
- iv. spending more time alone;
- v. sleeping too or too little and at odd hours (usually late at night);
- vi. spending more time on how to get more of the substance; and
- vii. stealing or borrowing to purchase more substance.

### **Causes of Substance Abuse**

Causes of substance abuse vary greatly, depending on persons and the extent of their addiction. This depend on their social environment, genetic inheritance as well as mental and physical health. The main reason that persons begin to abuse substances is the belief that using the substances will energise them to face their social and emotional challenges head long. The following are some of the main causes of substance abuse:

1. **Genetic**-Researchers (Ige, 2000, Idiege, 2009) have discovered a set of genes that can make a person vulnerable to developing a substance abuse problem. If, for instance, a person has a parent who is an addict, the person is at risk of struggling with similar challenges in life;
2. **Social Environment**-The place that substance abusers spend most of their time can have an impact their future lives. Therefore, those who are raised by substance abusers will become vulnerable if they lack effective coping skills and proper social support;
- iii **Peer Pressure**-Peers bestow attention and status on persons of their group who talk about their experiences with substances. This may have roots, from the persons' inability to cope with stress challenges that lead them to take substances and abuse them invariably;
3. **Personal**-The lack of confidence in the performance of sexual activities tempt persons to take substances in order to measure up with the needs of the opposite sex. This leads to substance abuse when consumed in large quantities (Ige, 2000).

### **Abused Substances**

Substances mostly abused possess chemicals that can change the metabolism of persons and are both legal and illegal. They can give the persons pleasurable "high" to ease their stress or help them avoid problems in their lives (Lafinham & Arowolo, 2005). They include:

- i. **Depressants** – Depressants include alcohol, aspirin, cocaine, marijuana, morphine and opium. They depress the nervous system and affect metabolism;

- ii. **Stimulants** – Stimulants include caffeine, Benzedrine and nicotine. They influence the body metabolism and cause high activities, unconsciously;
- iii. **Narcotics** – They include opium, heroine, codeine and methadone;
- iv. **Cigarettes and other Tobacco Products** - Tobacco contains nicotine which gives a person a little rift of pleasure and energy. The impact wears their users off and leaves them wanting more;
- v. **Phencyclidine** – This substance can cause the users to feel extremely paranoid, become aggressive, have unusual amount of energy and become dangerous to others around them.

### **Impacts of Substance Abuse**

The impacts of substance abuse are profound and felt by the abuser both physically and psychologically and can be visible even with family members. They (impacts) also spread beyond the users and include public cost on tax payers' money used to militate against the phenomena. The psychological impacts come from the changes that take place in the brain of the users. Initially, many people start using substances to cope with stress or pain. This creates a chain of events whereby anytime the users encounter stress or pain, they resort to substance. The users are therefore, obsessed with obtaining and using the substance. This syndrome creates the belief in them to the effect that they cannot function or handle life without the use of the substance. The physical impacts vary by substance but are typically seen in all systems of their body like the brain. These impacts are due to repeated usage. The brain, thus become inundated with foreign chemicals during substance use and depend on these substances to fix its equilibrium. One prominent impact of substance abuse is children born to substance-using mothers who have cognitive impairment throughout life (WHO, 2001). Regarding mortality, one-in-four deaths are due to substance abuse (WHO, 2012).

### **Cases of Substance Abuse in Nasarawa Local Government Area of Nasarawa State, Nigeria**

Substance abuse in Nasarawa Local Government Area has been a matter of concern to both government and governed. To tackle this menace, the Federal Government of Nigeria enacted a law in 1999, creating the National Drug Law Enforcement Agency (NDLEA) saddled with the responsibilities of mitigating the use and circulation of prohibited substances. The impact of the Agency has been tremendous in curbing the spread and use of the substances. Due to the health hazards associated with some substances like tobacco, the Federal Government made it compulsory for every advertisement on tobacco to carry a warning that it is dangerous to health of the smoker (Obafemi, 2017). By 2013, Nigeria was only a transit to nation for illicit drugs but now, it is recognized internationally as a user nation (Ojo, 2018). This trend was similar in Nasarawa Local Government Area where the most commonly used drugs were the illicit ones due to their easy availability, low cost and the feeling by their users that they are not using anything illegal. The most commonly used illicit drug is "Indian hemp" or cannabis (UNODC, 2010).

### **Impacts of Counseling**

The best way of preventing substance abuse lies in early detection, diagnosis and treatment where the role of Vocational Rehabilitation (VR) is exercised. Eliminating the scourge requires access to information, diagnosis and counseling therapy. The greatest barriers to eliminating it therefore, are ignorance and stigma. Information through campaigns about substance abuse are of supreme importance so that persons affected and their families can be approached for counseling therapies.

Reducing stigma also improves the quality of life of persons with substance abuse and their families by improving their mobility interpersonal relationships, employment, rehabilitation and social activities (Sartorius and Schulze, 2005). Persons with substance abuse have diverse vulnerabilities with differences in gender especially when they have disabilities. This calls for attention from counsellors who are trained to promote the empowerment of persons with disabilities and their family member dependants impacts also come in the form of identifying barriers to treatment or providing diagnosis for persons who are blind or visually impaired. These barriers include:

- i. Inaccessible Methods and Materials – This occurs when facilities provided for the public do not match the needs of persons who have impairment. For instance, the absence of Braille signs for the blind signifies inaccessibility to facilities. Similarly, the absence of a sign-writer means the visually impaired is left out of the processes.
- ii. Negative attitudes and prejudices about persons with substance abuse, especially those with disabilities who are sometimes regarded as not relevant for treatment.
- iii. Lack of staff training – Counsellors who attend to persons with substance abuse also need to learn about working with persons who are blind or have visual impairment so that they would be carried along in the treatment.

It is therefore, important to identify the referral outfits that would handle and coordinate comprehensive needs of persons with disabilities and substance abuse (Koch, Shearer & Nelpovich, 2004). Counselors, physical therapists and those others who work with persons with disabilities are also in a better platform to understand the importance of identifying and treating substance abuse clients. This can be achieved through:

- Broadcasting information about list of illicit drugs in circulation;
- Spreading information on media outfits about risks of excessive alcohol intake and its use disorders;
- Appointing desk officers in public hospitals and clinics both at rural and urban areas who would be utilized for disseminating information on substance abuse and people with disabilities;
- Screening clients for substance abuse and disabilities. This ensures that no iota of doubt is left unattended to regarding the possible processes of determining those persons who might require further evaluation and treatment;
- Providing database of service providers who would work with or would be willing to learn to work with persons with disabilities.

This work also requires going a step further to help the providers render their services to the persons with disabilities.

## **CONCLUSION**

The roles played by counsellors in attending to persons with disabilities and substance abuse are numerous, since the service is rendered in order to reverse ailments and hopelessness living with the persons. The provision of trained counsellors, physical facilities and relevant working materials are efforts that can be put in place to reach the glorified land of the persons. Due to inadequacy of trained counsellors, combined team work approach to the service is a ready rescuer, where specialists like nurses, teachers, and psychologist can exchange their expertise about clients. This approach will add value and ensure that persons with substance abuse and disabled are rehabilitated into the society, thus allowing them to have a feeling of belonging.

## **RECOMMENDATIONS**

The following recommendations are propounded:

- i. Group or team work counselling should be put in place in areas where trained counsellors are inadequate. The group counselling should form an integral part of the counselling service for persons with disability and substance abuse;
- ii. In order to encourage rehabilitated persons who have benefited from group counseling, they should be encouraged to invite others of the same dilemmas.
- iii. Early detection of persons with disability and substance abuse should be part and parcel of rehabilitation exercise in the society.
- iv. Government, philanthropists and the society should place more efforts in curbing substance abuse for persons with disabilities.

- v. All barriers to the success of clients of the substance abuse and disability should be removed because men are born free and should be so.

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