NIGERIA NIG	NIGERIA Territory: 923,768 km² Capital: Abuja	Rath Article at the field at
	Map No. 4228 UNITED NATIONS October 2004	BASIC DATA
	Total population (millions)	2009 – 158.3*
Van Verland and Kalina and The DY	Population under age15 (as % of total)	2010 - 16.3*
and the second s	Life expectancy at birth (years)	2008 – 48**
Proc	Adult literacy rate (% age 15 and above)	2008 – 72**
Call of Gainer Venice Parts And Call Stream Call Economic Parts	Youth literacy rate (% age, 15-24)	2007 – 87**
	GDP per capita (US\$)	2009 - 2,400***

**NOTE:** The map displayed in this document serves as a reference aid only. The boundaries and names shown and the designations used on it do not imply official endorsement or acceptance by the United Nations.

\* UN Population Database (2010)

\*\* UNICEF Country Statistics (2010)

\*\*\* CIA The World Factbook (2010)

### **National Focal Point**

Dr. Audu Moses, Project Director

Substance Abuse Treatment & Rehabilitation Centre

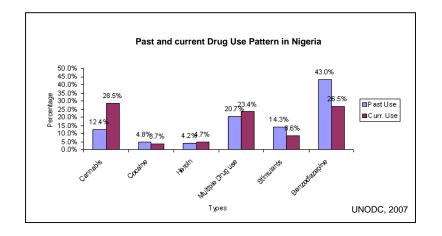
Vom Chirstian Hospital Premises

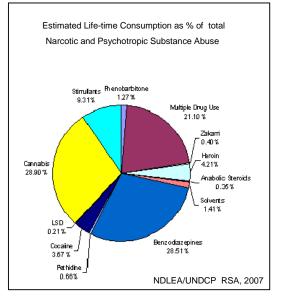
P.M.B. 07 Vom, Plateau State

#### **Drug Abuse and Drug Dependence Treatment Situation**

#### According to UNODC data for the year 2007:

- The estimated lifetime consumption of cannabis among the population is 10.8%, followed by psychotropic substances like benzodiapines and amphetamine-type stimulants (10.6%), heroin (1.6%) and cocaine (1.4%) in both urban and rural areas.
- Drug abuse appears to be more common among males (94.2%) than females (5.8%).
- The age of first use is 10 29 years.
- The use of volatile organic solvents (0.53%) is widely spread among the street children, in-school youth and women.
- Multiple drug use happens nationwide (7.88%) to varying degrees.
- The abuse local plants includes smoking of PawPaw leaves and the seeds of 'Zakami' (Datura metel), which grows in most of the North Western and North Central regions.
- For both organic solvents and multiple drug use, there is greater prevalence in the rural than urban areas.
- Modes of drug intake are through smoking (cannabis), inhalation or sniffing (organic solvents, cocaine, heroin), chewing (local leaves or 'Zakami') and licking or swallowing (psychotropic drugs).
- The general poverty level increases the pressure for survival and at the same time the vulnerability of street children
- Especially commercial sex workers, labourers, commercial drivers and law enforcement agents believe that narcotics increase their energy for long working hours.
- According to a recent WHO/FMOH/University of Ilorin study on drug abuse in Lagos/Nigeria, Injecting Drug Use (IDU) is now common among street youth or 'area Boys'.





#### Drug dependence treatment situation:

- There are 19 medical sites in Nigeria offering drug dependence treatment.
- Seven of these centres participated in the needs assessment survey.
- At the seven participating rehabilitation centres there are 255 beds available for drug dependence treatment.
- The duration of treatment varies between 90 days, 3 months, 6month and one year.
- Between July 2008 and June 2009, 355 new clients were admitted.
- At 4 of the 7 centres, the treatment services are divided into phases or stages.
- At 4 of the 7 detoxification is practised.
- At 4 of the 7 relapse prevention is included.
- At 4 of the 7 drug dependence treatment entails aftercare resp. social reinsertion.
- One of the seven centres offers Social Work and Spiritual Care.

All centres combine medical and psychiatric treatment. At least moderate emphasis is put on individual psychotherapy, supportive individual counselling, Family therapy and relapse prevention. Some centres offer group therapy. None of the centres prescribes methadone or other substitution drugs as part of their treatment plan. All prescribe antipsychotic, antidepressant and antimanic agent for co-morbid mental problems.

At all centres, the assessment of clients includes psychiatric and educational/vocational history, criminal activities, family functioning and social support along with alcohol and drug abuse history. All centres carry out psychological tests, urinalysis and HIV testing as well as Hepatitis B and C tests.

In the course of the year 2009, 50-83% of all clients completed their treatment for drug dependence successfully, 0-35% had premature discharges and 0-11% dropped out, while 0-20% absconded from admission. The most common reason for premature termination were financial constraints followed by the use of illicit drugs out of the premises.

## **HIV/AIDS Situation**

According to UNAIDS Epidemiological Fact Sheet on HIV and AIDS (2008):

- Estimated number of people living with HIV: 2,600,000
- Adults aged 15 to 49 prevalence rate: 3.1%
- Adults aged 15 and up living with HIV: 2,400,000
- Women aged 15 and up living with HIV: 1,400,000
- Children aged 0 to 14 living with HIV: 220,000
- Deaths due to AIDS: 170,000
- Orphans due to AIDS aged 0 to 17: 1,200,000

According to the UNODC (2007), the HIV epidemic has now crossed the 5.0% prevalence mark. The highest prevalence rate of HIV/AIDS is in the young age group of 12 -24 years.

#### Treatment situation according to the UNAIDS Country Progress Report (2009):

- There were 160 sites offering antiretroviral treatment (ART) in December 2006.
- By March 2007 the number of ART sites had increased to 210.
- By September 2007 the number of ART sites had increased to 215.

In the course of the year 2009 the national government of Nigeria announced the Free ARV Treatment Policy (2006) at all public institutions as well as free delivery services for HIV positive pregnant women in federal health institutions. Among the key policy documents and guidelines issued, there is also the National Gender Policy postulating greater gender perspective in the national response. The National OVC Policy will guide OVC activities for the next 5 years, the National Blood Transfusion Policy (2006) seeks to ensure the quality of blood and blood products. Finally, the government defined specific treatment guidelines in the National Policy on Injection Safety and Health Care Waste Management (2007).

#### **Training of Trainers**

The Regional Training of Trainers (TOT) on TREATNET II training package for Sub-Saharan African region, was successfully completed and it took place in Mombasa, Kenya, between the 4th and 17th, October 2009. In this ToT a total of **50 trainers** were trained 3 different Volumes.

Current Status*	Volume A	Volume B	Volume C
Trainers	2	2	2

\* Activity Report GLO/J71 (July 2010)

Medical staff at the 7 participating treatment centres comprises the following employees:

- General Medical Practitioners
- Psychiatrists
- Psychiatric nurses
- Clinical psychologist
- Vocational and occupational therapist
- Laboratory staff
- Social workers
- Counsellors
- Clinical psychologist

All the investigated units offer some type of in-service training in the unit and supervision. However, none of the units boasts staff with formal university or formal non-university based courses in drug addiction.

#### **National Counterparts**

- Ministries of Health (Health and Medical Services)
- Civil Society Organisations
- National Campaign Against Drug Abuse Authority (NACADAA)
- Prisons Services
- The Joint UN Team on AIDS (UNODC, WHO, UNAIDS, Civil Society and Government Officials)
- National AIDS & STIs Control Programme (NASCOP)

## **Academic Institutions**

University of Ilorin

## **Treatment Centre Details**

SN	Institution	Contact person	Geopolital zone
1	National Hospital, Department of Psychiatry	Name: Olusola.T. Ephraim-Oluwanuga	North Central
	Central Business District Phase II Abuja	Position: Consultant Psychiatrist/Head of Dept.	
	Phone: +23496725984	E-mail: auntysola@yahoo.com	
		Phone: +2348033262921	
2	Substance Abuce Treatment & Rehabilitation Centre	Name: Dr. Audu Moses.	North Central
	Vom Chirstian Hospital Premises	Position: Project Director	
	P.M.B. 07 Vom, Plateau State.	E-mail: mosesaudu2002@yahoo.co.uk	
	E-mail: satrcvom@gmail.com	Phone: +234 805 135 3152	
	Phone: +234 805 135 3152 , +234 803 889 0000.		
		Name: Praise Hon	
		Position: Admin Cordinator/ Counsellor	
		E-mail: hon.praise@yahoo.com	
		Phone: +234 803 889 0000	

3	Department of Behavioural Sciences	Name: Dr A.B Makanjuola	North Central
	University of Ilorin Teaching Hospital	Position: Consultant Psychiatrist	
	Ilorin, Kwara state	E-mail: makanju2@yahoo.com	
		Phone: +2348034990495	
4	Drug Treatment and Rehabilitation Ward	Name: Dr Abdulmalik JO	North-East
	Federal Neuropsychiatric Hospital	Position: Consultant Psychiatrist	
	Baga Road, Maiduguri	E-mail: jfutprints@yahoo.com	
		Phone: +2348027617689	
		+2348073839840	
	Drug and Alcohol Treatment, Education and Rehabilitation Unit	Name: Dr. Ebiti, Nkereuwem William	North-West
	Federal Neuropsychiatric Hospital	Position: Head of the unit	
	Barnawa. Kaduna State	E-mail: <u>bill_ebiti@yahoo.com</u>	
	Balliawa, Naulia State	Phone: +2348057741046	
6	Department of Psychiatry	Name: Richard Uwakwe	
	Nnamdi Azikiwe University Teaching Hospital,	Position: Consultant Psychiatrist.	South-East
	Nnewi , Anambra State	E-mail: ruwakwe2001@yahoo.com	
		Phone: +234 803 550 4931	
7	Drug ward	Name: Owoidoho Udofia	
	Federal Psychiatric Hospital	Position: Consultant psychiatrist	South-East
	Calabar	E-mail: udofia@npmcn.edu.ng	
		Phone: +2348037147245	

# **UN System**

FAO	IFAD
ILO	UNIC
UNAIDS	UNDP
UNIDO	UNESCO
UNIFEM	WHO
WMO	