

OPIOIDS MISUSE, SOCIAL FACTORS, ROLE OF FAMILY AND RELIGIOUS INSTITUTIONS IN AFRICA

Dr. Okafor, Kelechi Emmanuel

Department of Religion and Peace Studies

Imo State University, Owerri, Nigeria okafore093@gmail.com

+2348061315110

Abstract

Opioids, ordinarily, are a class of natural, semi-synthetic, and synthetic drugs, like, morphine, codeine, heroin, oxycodone, hydrocodone, fentanyl, etc., that reduce moderate to severe pain. They can create a sense of euphoria, making them highly addictive and dangerous, with a high risk of abuse, dependence, and overdose. Opioid abuse is increasing in Africa, today, with East Africa reporting the highest number of users (57% of Africa's total) followed by Southern Africa (28%) West Africa (8%) and North Africa (7%). This is due to some socio-cultural, religious, and family factors like widespread poverty, high unemployment, stigma and discrimination against people who use drugs, poor parental supervision, etc. A situation which is having a devastating effects on Africa, currently, retarding sustainable development in the continent. This research generated data through the primary and the secondary sources. For data analysis and application, the phenomenological and the sociological methods were used. The employment of the neurobiological and the structural functionalism theories of drug use, is for the promotion of authenticity in this study. The general objective of this study is to discourage the misuse of opioids in Africa, while one of the specific purposes is to expose the best ways opioids can be used to improve healthcare in contemporary Africa.

This research discovered that opioid misuse causes a lot of health, socio-economic, and political problems like, respiratory depression, domestic violence, economic losses due to reduced productivity, insurgency, etc. It is our recommendation inter alia that the governments of the countries in Africa should enact and carefully implement stringent laws, to address the issues associated with the abuse of opioids in the continent, for improved and quality healthcare in Africa.

Keywords: Opioid, Misuse, Social factors, Family, Religious Institutions

Introduction

The abuse of opioids in contemporary Africa has become a nightmare; it has constituted a monster threat to sustainable development in the continent. One may be right if he says that it (Opioids abuse) is a hydra whose tendril is vitiating the attempts by some well-meaning Africans, and foreigners to reposition the continent for proper human capital development, and its accompanying positive sociocultural and political transformation.

Social factors like wide spread poverty, stigma surrounding addiction, limited access to healthcare, regulatory weaknesses, peer pressure, family problems, migration and displacement, globalization, rapid urbanization, limited educational and job opportunities, etc., are contributing in no small measure, to the astronomical surge in the said unfortunate situation in this part of the world, today. However, all hope is not lost. Social institutions such as the family, religion, etc., in contemporary Africa have a significant role to play, in order to salvage the above situation, and some Africans from psychosis, and untimely death. The misuse of opioids must always be condemned during family, and religious gatherings. Stigmatization, and discrimination against people suffering from opioids misuse in Africa can be counterproductive; they can prevent

opioids misuse victims especially, women, from seeking help and accessing treatment.

Opioids illegally infiltrate Africa through a lot of means, which include maritime, air and land transport mainly because of poor enforcement of drug trafficking laws, which abound in African countries like Nigeria, Egypt, South Africa, Kenya, etc., by certain corrupt officials and organized crime groups. Contemporary African political leaders must carefully monitor all shipments from, mainly, India and China, that arrive at major seaports especially, in West Africa. Sometimes opioids are hidden within legitimate cargos.

Medically opioids are primarily used for pain relief, including anesthesia (Stromgaard, Krogsgaard-Larsen, and Madsen, 2009). Therefore, if adequately used, opioids can improve healthcare in Africa. Once again, all hands must be on deck to ensure the total end of opioids misuse, and its accompanying devastating effects in Africa.

Opioids

According to Health Canada (2024) opioids are drugs with pain relieving properties that are used primarily to treat pain. They can also induce euphoria (feeling high) which gives them (opioids) the potential to be used improperly. Opioids can be prescribed medications like codeine, fentanyl, morphine, oxycodone, hydromorphone and medical heroin. Once again, opioids are intended to treat pain. Doctors may also sometimes prescribe them for other conditions, such as; acute (short-term) moderate to severe pain, chronic (long-term) pain, moderate to severe diarrhea, and moderate to severe cough.

Prescription opioid medications are available in various forms, such as, syrups, tablets, capsules, nasal sprays, skin patches, suppositories, and liquids for injection (Health Canada, 2024). The short-term side

effects of using opioids may include; drowsiness, constipation, impotence in men, nausea and vomiting, euphoria (feeling high) difficulty breathing, headaches, dizziness and confusion, while the long-term effects of using opioids may include; increased tolerance, substance use disorder or dependence, liver damage, infertility in women, worsening pain, and life-threatening withdrawal symptoms in babies born to mothers taking opioids. It is pertinent to observe here that opioids can also be produced or obtained illegally.

The National Institute on Drug Abuse USA (2024) expects the above views when it holds that opioids are a class of natural, semi-synthetic, and synthetic drugs. These include both prescription medications used to treat pain and illegal drugs like heroin.

In the words of Hemmings and Egan (2013, p. 253), opioids work on opioid receptors in the brain and other organs to produce a variety of morphine-like effects, including pain relief. However, an overdose or concurrent use with other depressant drugs like benzodiazepines can result in death from respiratory depression (FDA, 2016). A careful look at the said ideas indicates that opioids are like two-edged swords; they can improve the health of man if properly used, they also have the capacity to sacrifice human life and dignity at the altar of ridicule if misused.

Theoretical Framework

Theoretical framework is based on an existing theory or theories in a field of research that is related and/or reflects the hypothesis of a current study (Obilor, 2021, p. 44). In the words of Grant and Osanloo (2014) theoretical framework is a “blueprint” or a guide for a research. Fulton and Krainovich-Miller, in Obilor (2021, p. 44) compare the role of the theoretical framework to that of a map or travel plan. Thus theoretical framework guides the researcher so that he would not deviate from the confines of the accepted theories to make his final contribution scholarly and academic (Ibe, 2021, p. 25).

This research has adopted two theories, which relate and connect drugs use, social functions, and dysfunctions in this academic enquiry. They are the neurobiological and the structural functionalism theories of drug use. According to George (2011), the researchers who developed and shaped major neurobiological models are George F. Koob, Michel Le Moal, Terry Robinson, and Kent Berridge. Their foundational work established the modern understanding of drug addiction as a chronic brain disease involving distinct neurobiological stages.

George F. Koob and Michel Le Moal write that long-term drug use leads to a gradual transition. An individual shifts from being motivated by the drug's positive effects (reward) to using the drug to escape increasingly negative and stressful emotional states associated with withdrawal. This creates a new, altered homeostatic set point in the brain (George, 2011). Terry Robinson and Kent Berridge, in 1993, proposed that repeated drug use sensitizes the brain's mesolimbic dopamine system, causing drug-related cues and stimuli to acquire a powerful, motivating value.

The views of the said scientists have led to the current understanding of addiction as a three-stage cycle that affects specific brain regions; Binge/Intoxication (the initial rewarding and pleasurable effects associated with drug use, driven primarily by the basal ganglia and the dopamine system); withdrawal/Negative Affect (A State of negative emotionality, stress, and anxiety that emerges when a person stops using the drug. This is linked to the activation of brain stress systems in the extended amygdala); and preoccupation/Anticipation—craving (the stage of intense craving and a return to drug-seeking behaviour. This involves a compromised prefrontal cortex, which reduces impulse control and executive function) (George, 2011).

From the foregoing it is obvious that the neurobiological theory of drug use believes that addiction is a chronic brain disorder resulting

from the interaction of biological, psychological, and environmental factors that cause profound and lasting changes in brain structure and function. It holds that these changes affect brain circuits involved in reward, stress, and self-control, leading to compulsive drug-seeking behaviour regardless of harmful consequences. Concerning the structural functionalism theory of drug use, its major idea sees the society as an interconnected system, where all parts work together to maintain stability. Drug use, thus, is viewed as a form of deviance that can disrupt that stability (Merton, 1938, pp. 672-682). For example, Emile Durkheim (1858-1917) one of the founders of functionalism, argued that during times of rapid social change, a breakdown of common social norms and controls can leave individuals feeling isolated and without a clear purpose. He believed this state of anomie could lead people to engage in self-destructive behaviours, like drug abuse, to cope. Robert K. Merton (1910-2003) refined Durkheim's concept of anomie with his "strain theory". Merton noted that drug addicts and alcoholics are examples of retreatists who withdraw from society to cope with their feelings of failure. For Talcott Parsons (1902-1979) a leading structural functionalist, his work on the concept of the "sick role" can be used to analyze addiction. The "sick role" describes a set of social expectations for someone who is ill, like seeking medical help and wanting to get better. Addiction can be viewed as a chronic illness that involves social expectations and has a potential for deviance (Agnew, 2001, pp. 319-361).

The best application of the said theories is in the areas of the causes, and effects of opioids misuse in Africa. Socioeconomic hardships are some of the factors driving opioids abuse in Africa, and consequentially, the underdevelopment of the continent. This abysmal situation can be fixed if the contemporary African political, sociocultural, and religious leaders live up to expectations.

Opioids Misuse in Africa

The rate at which opioids are misused in Africa today, is indeed alarming. Onohuean and Oosthuizen (2025) expect the said view when they write that opioid abuse is an escalating public health crisis across Africa, fueled by a complex combination of pharmaceutical trafficking, easy access to unregulated opioids, and widespread socioeconomic challenges. The crisis is characterized by both rising addiction and a paradoxically low availability of controlled opioids for legitimate medical use, leaving many patients with severe pain untreated. X-raying the level of the increase in opioids misuse in the continent, they hold that opioid abuse is increasing throughout Africa, with East Africa reporting the highest number of users (57% of Africa's total) followed by Southern Africa (28%) West Africa (8%) and North Africa (7%).

It is pertinent to observe here that pharmaceutical opioids such as tramadol and codeine are the most commonly abused drugs. In 2017, a survey in Nigeria indicated that 4.7% of the population aged 15-64 misused pharmaceutical opioids, especially, tramadol (Onohuean and Oosthuizen, 2025). There is no gainsaying the fact that misuse is prevalent among young people, including secondary, and university students, as a result of social pressures and peer influence. A good number of them are poor, disenfranchised, and feel they have few options for a better life. Other vulnerable groups are sex workers, factory workers, and long-distance drivers, who use opioids to boost energy, endure hardship, or cope with trauma. Heroin use is common in some countries, with injecting heroin becoming a major public health issue in Tanzania and a concern in other East African nations (Onohuean and Oosthuizen, 2025).

Factors driving opioid misuse in Africa, according to Onohuean and Oosthuizen (2025) include illicit trafficking, unregulated pharmaceutical access, socioeconomic hardship, and easy access and

normalization. Global trafficking routes, particularly for heroin from Afghanistan, pass through East Africa and then West. This creates opportunities for local sales, flooding the market with cheap, readily available narcotics. In West Africa, illicit export of highly addictive tapentadol- carisoprodol combinations from India is a major driver. Corruption and weak regulation allow tramadol and codeine-based cough syrups to be sold easily and without a prescription from pharmacies and black markets. Permit me to observe at this juncture that high unemployment, poverty, and limited opportunities attract many, especially youths, to the lucrative drug trade. Opioids, also in the words of Onohuean and Oosthuizen (2025) are used as a cheap coping mechanism for stress, boredom, or traumatic experiences. The drug trade's financial lure and improved transportation infrastructure, they add, have increased availability. In some communities, they further maintain, the use of opioids has become normalized.

It is regrettable that while illicit opioid use is rising in Africa, a severe shortage of opioids exists for legitimate medical purposes, like pain management for cancer and palliative care. Fear of addiction, stigma, and overly restrictive regulations limit access to essential pain medication for those who truly need it in the continent.

Effects of Opioids Misuse in Africa

Scholars like Onohuean and Oosthuizen (2025) Akpoki (2024) Kurth, Cherutich, and Bruce (2020) have written on the abuse of opioids in Africa, and in all they agree that this misuse has impacted the continent very negatively. UNODC (2020) writes that the non-medical use of opioids is creating a growing epidemic of addiction, especially among youths, manual labourers, and vulnerable communities in West, Central, and North Africa. It also notes that consistent and recreational misuse can lead to fatal overdoses, which are often underreported due to poor surveillance systems in Africa. Increased risk of infectious diseases is another public health effect of

opioids abuse in Africa. Unsafe drug practices, like the exchange of blood in rituals or needle sharing among those who inject drugs, increase the risk of transmitting diseases like HIV, Hepatitis C, and Hepatitis B. It is pertinent to observe here that the misuse of opioids in Africa has led to severe physical and mental health issues, and strained healthcare systems in the continent.

Opioid misuse causes a lot of health problems, including respiratory depression, seizures, cardiovascular damage, liver damage, and psychiatric comorbidities like depression and psychosis. Social, economic, and political and security effects equally highlighted by the UNODC (2020) are damaged families and relationships, child neglect and abuse, gender-specific vulnerabilities, increased crime and violence, intensified stigma, lost productivity, high healthcare costs, diversion of resources, fueling conflicts, organized crime, etc., in contemporary Africa.

In the view of the UNODC (2020) Opioid addiction places a great psychological and emotional toll on families, leading to conflict, domestic violence, and a breakdown of relationships. Children of people who misuse drugs are particularly vulnerable and face increased risks of neglect, abuse, and poor academic performance. While women who use drugs face significant barriers to accessing treatment due to stigma and are less likely to seek help for fear of being separated from their children.

Some may also engage in sex work to support their addiction, increasing their risk of sexually transmitted diseases and violence. Opioid misuse has been linked to higher rates of criminal behaviour, including violence, theft, kidnapping, and drug trafficking, which are ravaging some contemporary African villages and towns. It is also worthy of note that individuals with opioid addiction in the continent face severe stigma from their communities, religious leaders, and law enforcement, which discourages them from seeking treatment.

There is no gainsaying that the crisis associated with opioid abuse in Africa results in economic losses due to reduced productivity especially among the youths, and working-class populations. Governments and families face a heavy financial burden from medical and psychiatric care related to opioid misuse, as well as the costs of law enforcement and incarceration. Again, the widespread trade of illicit and counterfeit opioids, often sourced from Asia, diverts resources and attention from the legitimate medical needs of the population. For UNODC (2020) this creates a dual-crisis situation; a surge in recreational misuse alongside a severe shortage of opioids for legitimate medical use, such as pain management for cancer patients in Africa.

In regions like Northern Nigeria, opioids such as tramadol have been linked to conflicts, with insurgent and vigilante fighters using the drug to boost courage and reduce fear before committing violent acts. Porous borders and corruption enable international and local criminal networks to traffic opioids, fueling violence and illicit financial flows, while poorly enforced regulations on the sale of prescription opioids allow black markets to thrive, contributing to the escalation of the crisis (UNODC, 2020). From the foregoing it is obvious that the abuse of Opioids in Africa has led to the untimely death of some Africans. This unwholesome situation can be remedied if the leaders of contemporary African families, religious institutions, governments, as well as the people completely align with the genuine spirit of the African traditional values which promotes truth, commitment, respect for human life and dignity, etc.

The Role of the family, Religious Institutions and Governments in Checking Opioids Misuse in Africa

Social institutions, in African traditional setting, are highly regarded, due to their commitment to the promotion of a society characterized by rectitude. Today, some Africans have little respect for the family,

religious institutions and the governments, as a result of the failure of some of their authorities, who have compromised the authentic African traditional standards, and values.

Families, religious institutions and governments are places where the genuine spirit of the African indigenous values of purity, respect for human life and dignity, loyalty, respect for constituted authorities, patriotism, etc., is nurtured and consecrated, in African traditional set up. It is the duty of the leaders of the above social institutions in contemporary Africa to ensure that their followers stay away from opioids abuse, since the misuse, as we have seen in this study, threatens the existence of African families. God created opioid for amelioration of health conditions. Therefore, religious leaders in Africa must ensure that they are used for positive health reasons, such as treatment and healing. Contemporary African governments can also contribute positively to the proper use of opioids by making laws, policies, and carefully implementing them to check the illegal influx of opioids from Asia, into Africa, and providing the people with life transforming social amenities, and infrastructure. Creating employment opportunities for the teeming African youths will go a long way to discourage opioid abuse in the continent.

Evaluation

Opioids, ordinarily, are drugs with pain relieving properties that are used to treat pain. They have the capacity to boast healthcare in contemporary Africa, if properly and legitimately used. The current trend that encourages the misuse of opioids among certain Africa people, especially the youths, really questions our sense of respect for human dignity, and life. This is because opioids can lead to psychosis, and death when abuse. Rather than being recalcitrant contemporary African people and institutions must unite in the fight against the said trend that is fastly constituting a hydra in the continent. This is necessary for sustainable development in Africa.

Recommendations

Opioids misuse has constituted a gigantic threat to the effort to enthrone sustainable development in Africa, today. Opioids abuse has also been linked to terrorism, banditry, kidnapping, armed conflicts, etc., which are ravaging contemporary Africa. A situation which has led to the untimely death of some Africans, leaving the continent bewildered, and underdeveloped. To remedy the said unfortunate situation we recommend the following:

1. Contemporary African political leaders must ensure that all African borders are adequately secured.
2. All African security apparatuses, especially those watching over African borders must discharge their duties diligently.
3. Sociocultural, and religious institutions in contemporary Africa must work in unison, promoting among Africans the genuine spirit of African traditional values which inter alia encourage decency, respect for human dignity, and life, etc.
4. All medical, pharmaceutical, etc., organizations in Africa, in synergy with contemporary African policy makers, must see to it that drugs like opioids do not fall into the wrong hands, or obtained without prescription from medical experts.

Conclusion

Opioids, both the synthetic and non-synthetic ones, can be of great help in the treatment of all manner of cancerous diseases; and pain relief, in the continent if adequately used. Be that as it may, it (opioid) is like a two-edged sword. Opioids have the capacity to distort, destabilize and disintegrate man's sensibilities, dignity, life, and core values, also, if handled with levity-little wonder the fabrics of contemporary African systems are witnessing, to a very great extent, devastation made necessary by incessant armed conflict, kidnapping,

banditry, poverty, etc., which have somehow been linked to drugs misuse.

Though the said situation looks scary, it can be remedied, as long as all hands are on desk. The family is the nucleus of the society. While this is true, it is also true that religion occupies a very significant position in the lives of Africans; it permeates, especially in the traditional set up, every department of life of the African. Leaders of other institutions in Africa are not left out. They must work in synergy with the aforementioned institutions (the family, and religion) in the continent for proper promotion of African traditional values of discipline, respect for human life and dignity, respect for the sacred, resilience, respect for constituted authority, etc. This is indeed necessary to salvage the continent. African borders must be adequately monitored, and the governments must also ensure that poverty, in its entirety, is adequately uprooted in this part of the globe, for sustainable development.

References

- Agnew, R. (2001). Building on the Foundation of General Strain Theory: Specifying the Types of Strain Most likely to lead to Crime and Delinquency. *Journal of Research in Crime and Delinquency*, 38, 319-361.
- FDA (2016). *FDA Requires Strong Warnings for Opioid Analgesics, Prescription Opioid Cough Products, and Benzodiazepine Labeling related to serious Risks and Death from Combined use*. FDA.
- George, F. (2011). Neurobiology of Addiction. *Focus, the Journal of Life Long Learning in Psychiatry*, 24, 97- 129.
- Grant, C. and Osanloo, A (2014). Understanding, selecting and integrating a theoretical framework in Dissertation Research: Creating the Blueprint for House Administrative Issues. *Journal connecting Education, Practice and*

Research, 10, 20.

- Health Canada (2024). *About Opioids*. Government of Canada.
- Hemmings, H. and Egan, T. (2013). *Pharmacology and Physiology for Anesthesia: Foundations and Clinical Applications*. Elsevier Health.
- Ibe, J. (2021). *Incarnational theology and cultural Ecology in the Light of Laudat Sil 43: A Study among the Maguzawa of Zaria Diocese*. Ph.D Thesis at the Catholic Institute of West Africa Port Harcourt, Rivers State Nigeria, Affiliate of University of Calabar, Nigeria.
- Merton, R. (1938). Social Structure and Anomie. *American Sociological Reviews*, 3, 672-682.
- National Institute on Drug Abuse USA (2024). U.S. Department of Health and Human Services.
- Obilor, J. (2021). God, Humanities and the Earth: Implications for Ecological Issues Today. *Nka Oma Journal of the Humanities*, 1, 44.
- Onohuean, H. and Oosthuizen, F. (2025). The Burden of Unlawful use of Opioid and Associated Epidemiological Characteristics in Africa: A Scoping Review. *Plos One Journals*, 501, 3.
- Stromgaard, K., Krogsgaard-Larsen, P. and Madsen, U. (2009). *Textbook of Drug Design and Discovery*, CRC Press.
- UNODC, (2020). *World Drug Report*. United Nations.