Self-Medication Practice Among Youths in Abua/Odual Local Government Area of Rivers State

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ABSTRACT

This study investigatedself-medication practice among youths in Abua/Odual Local Government Area of Rivers State.Two research questions guided the study. The Cross sectional surveyresearch design was used for this study. The sample size for the study was 400 Secondary school student. Multi-stage sampling procedure was adopted for the study. A structure questionnaire with reliability coefficient of 0.78 was used to collect data. Data was analysed using simple percentages and ANOVA.The results shows that 306(72.9%) had high practice of self-medication. The reason for self-medication include; 90(21.4%) agreed that their reason was for mild illness/ problem too trivial to consult the physician, 164(39.0%) indicated previous experience with the drug, 26(6.2%) indicated lack of time, 58(13.8%) indicated urgency of problem, 43(10.2%) indicated cost of consultation, 39(9.3%) indicated advice from friend (who is not a doctor), 90(21.4%) indicated mild illness/ problem too trivial to consult the physician and 164(39.0%) indicated mild illness/ problem too trivial to consult the physician. The findings of this study shows that there is a significant difference betweenin self-medication practice among youths based on age(p<0.05).Conclusively, the results showed self-medication practice among youths was high. Age showed that there is a significant difference in self-medication practice among youths. It was recommended among others that the National Drug Law Enforcement Agency should carry out an increase in awareness and continuous education in the community regarding the importance of professional consultation before drug use, the implications of irresponsible self-medication, and the place of responsible self-medication.

Introduction

The practice of self-medication is a global phenomenon, which has become an issue of much debate in health care. The phenomenon is not restricted to a region or race: both developing and developed countries are experiencing significant prevalence of self-medication (ALBashtawy, Batiha & Tubaishat, 2014). Every day, many people around the world practice self-care through self-medication which is now increasingly being considered as a component of self-care (ALBashtawy, et al, 2014). Self-medication has traditionally been defined as the taking of drugs, herbs or home remedies on one's own initiative, or on the advice of another person, without consulting a medical qualified personal. According to World Health Organisation (WHO) 2019), self-medication is the obtaining and consumption of a drug without the advice of physician either for diagnosis, prescription or surveillance of the treatment. It is medication of oneself without the advice of a physician. It is a non-formal health service and health related decision making which occurs in normal social context of everyday lives (Trung, 2018).

Age is associated with the activity level of an individual. The age of an individual sometimes determine the practice of that person as he/she might acquire more knowledge on daily basis pertaining life and other activities. The age of youth could sometimes determine his practices towards self medication, as it may have seen the effect of self medication over the years from friends and other people. According to Maina, Andrew and Ngugi (2016) age does not influence the practice of self medication among youths. Age does not even have a significant influence on the practices associated with self medication practice. He further asserts that older youth practice self medication when compared to younger ones (Makhum, 2016).

The World Health Organization advocates self-care and responsible Self-medication. Self-medication may have some benefits if individuals use medicine appropriately, such as empowering individuals to take care of themselves and be responsible for their health and further reducing healthcare costs (Lee, Chang, Hsu, Chi, Huang & Yeh, 2017). However, responsible self-medication

does not imply an absence of risk. Self-medication is far from being a completely safe practice: it has several consequences for health. It can lead to incorrect self-diagnosis, delays in seeking the vital medical advice when needed and to infrequent but severe adverse reactions. It can also lead to incorrect dosage, poly pharmacy and dangerous drug interactions that can also be misused by the community and/or patients. This can lead to noncompliance with a drug regimen which can result in serious outcomes like adverse drug reaction and reduction in the quality of treatment (Lee, et al, 2017). Self-medication leads to increase in pathogens resistance, drug dependence, and incorrect administration. This can result into wasting of resources, incorrect choice of therapy, masking of a severe disease and risk of dependence and abuse (Patel, Prajapati, Ganguly & Gajjar 2012). Self-medication can also lead to fever, headaches, and cough; as well as diarrhea, cold, acidity, and pain condition.

Several factors have been associated with predisposal to self-medication. Patterns vary among different populations and are influenced by various factors, such as age, gender, expenditure, self-care orientation and socioeconomic Patel, Prajapati, et al, 2012). Also tells of educational level, socioeconomic istatus, access to medical information, awareness about health etc. but accessibility to medicine and health care facilities, medical knowledge, satisfaction, and no seriousness of illnesses attitude are also predisposing factors. High illiteracy rate and poor exposure to medical information in most developing countries are some of the contributing factors to the high prevalence of self-medication (Patil, Nagaiah, Raikar & Rao, 2018).

Therefore, the researcher deem it necessary to investigate self-medication practice among youths in Abua/Odual Local Government Area of Rivers State.

Aim of the study

The aim of this study is to investigate self-medication practice among youths in Abua/Odual Local Government Area of Rivers State.

Research questions

The following research questions were asked to guide this study.

1.   What is the self-medication practice among youths in Abua/Odual Local Government Area of Rivers State?

2.   What is the self-medication practice among youths in Abua/Odual Local Government Area of Rivers State based on age?

Hypothesis

The following hypothesis tested at 0.05 level of significance guided the study.

1.   There is no significant difference in self-medication practice among youths in Abua/Odual Local Government Area of Rivers State based on age.

Methodology

The design for this study is a cross-sectional survey design. The population for the study consisted of all senior secondary students in Abua/Odual Local Government Area of Rivers State. According to Abual/Odual Local Government Education Authority (2019) there are 3,715 students in the senior secondary schools.The sample size for the study consisted of 400 secondary school students. Multi-stage sampling procedure was adopted for the study. The instrument for data collection was the questionnaire designed by the researcher titled self-medication practice among youths. The instrument was be made of 2 sections section A; provided the socio-demographic data of respondent, section B focused on self-medication practice among youths.The instrument was validated by the researcher's supervisor and two other specialists in the department of Human Kinetics, Health and Safety Education in Ignatius Ajuru University of Education to establish its face and content validity. The test-retest method was used to test the consistency of the instrument. The questionnaire was administered to 30 senior secondary school students in Ahoada West Local Government Area, which share similar characteristics with the population of the study. The same questionnaire was re-administered after two weeks interval on the same respondents. The two results obtained were correlated by using Person Product Moment Correlation Coefficient (PPMCC). The instrument attained a reliability co-efficient of 0.78.The questionnaire titled self-medication practice among youthswere self-administered by the researcher and 3 trained research assistants on the senior secondary school students in Abua/Odual Local Government Area. The research assistant were trained on how to approach respondents on the objectives of the study and how to collate filled instrument. Filled instruments were collected at the spot for onward sorting and analysis. Data collected from this study was coded and analyzed using simple percentage (%) for demographic data, whileANOVA was used to test the hypothesis at 0.5 alpha level of significance.

Results

Results were presented in table 1-4

Research question 1: What is the self-medication practice among youths in Abua/Odual Local Government Area of Rivers State?

Table 1:   Self-medication practice among youths

Variables	Always Freq (%)	Sometimes Freq (%)	Rarely Freq (%)
Do you alter dose of prescribed drugaccording to symptoms	116(27.6)	282(67.1)	22(5.2)
Do you intentionally discontinue medication against Doctors advice feeling better	-	345(82.1)	75(17.9)
Do you take self-medication without readingleaflet/package insert	-	355(84.5)	65(15.5)
Have you given prescription to someone else	58(13.8)	281(66.9)	81(19.3)
Do you take self-medication for long periodwithout advice	58(13.8)	280(66.7)	82(19.5)
I take drugs from the counter	-	328(78.1)	92(21.9)
I buy my drugs from the store	-	355(84.5)	65(15.5)
I collect drugs from my neighbour	10(2.4)	345(82.1)	65(15.5)

Table 1 shows self-medication practice among youths. The results showed that 116(27.6%) of the respondents always alter doses of prescribed drugaccording to symptoms. 282(67.1%) sometime alter while 22(5.2%) rarely alter. 345(83.1%) intentionally discontinue medication against Doctors advice feeling better while 75(17.9%) rarely discontinue. 355(84.5%) take self-medication without readingleaflet/package insert while 65(15.5%) rarely does that. 58 (13.8%) always give prescriptions to someone else while 281(66.9%) sometimes does that. 58(13.8%) take self-medication for long periodwithout advice while 280(66.7%) rarely does that. 328(78.1%) sometimes take drugs from the counter while 92(21.9%) rarely does. 355(84.5%) buy drugs from the store while 65(15.5%) and 10(2.4%) always collect drugs from my neighbour. 345(82.1%) sometimes does while 65(15.5%) rarely does.

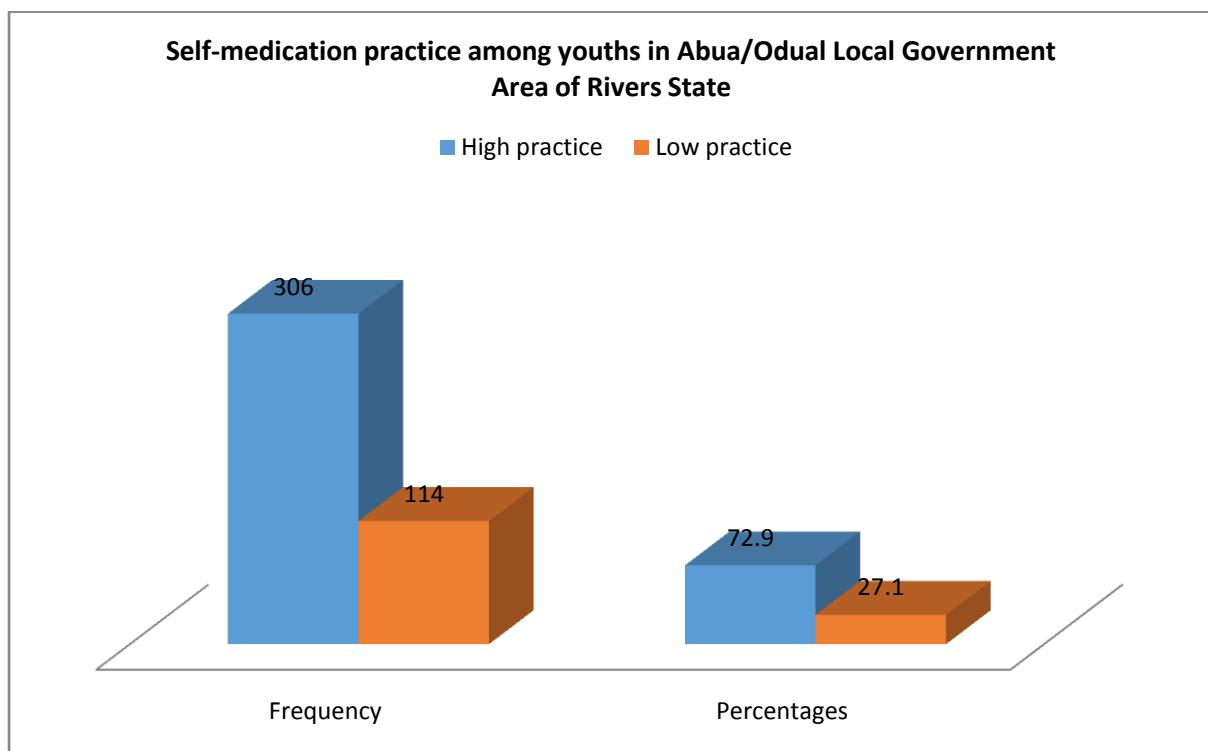**Overall Self-medication practice among youths**

Figure 1 shows the overall self-medication practice among youths. The results shows that 306(72.9%) had high practice of self-medication while 114(27.1%) had low practice of self-medication.

Table 2:   Reasons for self-medication

Variables	Frequency (n-420)	Percentages
Reasons for self-medication	**Yes**	**No**
Mild illness/ problem too trivial to consult the physician	90	21.4
Previous experience with the drug	164	39.0
lack of time	26	6.2
Urgency of problem	58	13.8
cost of consultation	43	10.2
Advice from friend (who is not a doctor)	39	9.3
Mild illness/ problem too trivial to consult the physician	90	21.4
Previous experience with the drug	164	39.0

Table 2 shows reasons for self-medication practice among youths. The results showed that 90(21.4%) agreed that their reason was for mild illness/ problem too trivial to consult the physician, 164(39.0%) indicated previous experience with the drug, 26(6.2%) indicated lack of time, 58(13.8%) indicated urgency of problem, 43(10.2%) indicated cost of consultation, 39(9.3%) indicated advice from friend (who is not a doctor), 90(21.4%) indicated mild illness/ problem too trivial to consult the physician and 164(39.0%) indicated mild illness/ problem too trivial to consult the physician.

Research question 2: What is the self-medication practice among youths in Abua/Odual Local Government Area of Rivers State based on age?

Table 3:   Self-medication practice among youths based on age

Variable		Practice of Self-Medication	
		Low Practice	**High Practice**
Age	10-15 years	10(4.5%)	212(95.5%)
	16-20 years	39(52.0%)	36(48.0%)
	21-25 years	65(52.8%)	58(47.2%)
	Total	114(27.1%)	306(72.9%)

Table 3 shows self-medication practice among youths based on age. The results showed that 212(95.5%) of those aged 10-15 years had high practice of self-medication, 36(48.0%) of those aged 16-20 years had high practice of self-medication while 58(47.2%) of those aged 21-25 years had high practice of self-medication.

Hypothesis 1: There is no significant difference in self-medication practice among youths in Abua/Odual Local Government Area of Rivers State based on age.

Table 4: Analysis of Variance (ANOVA) showing significant differencein self-medication practice among youths in Abua/Odual Local Government Area of Rivers State based on age

Sources	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	24.137	2	12.069	85.414	.000*
Within Groups	58.920	417	.141		
Total	83.057	419			

*Significant. $p<0.05$

Table 4 shows the One-Way ANOVA of significant difference in self-medication practice among youths in Abua/Odual Local Government Area of Rivers State based on age. The findings of this study shows that there is a significant difference betweenin self-medication practice among youths based on age[F(2, 417) = 85.414; p<0.05]. Therefore, the null hypothesis which states that there is no significant differencein self-medication practice among youths in Abua/Odual Local Government Area of Rivers State based on age state was rejected.

Discussions

Research question 1: What is the self-medication practice among youths in Abua/Odual Local Government Area of Rivers State?

Table 4.2 shows self-medication practice among youths. The results showed that 116(27.6%) of the respondents always alter doses of prescribed drug according to symptoms. 282(67.1%) sometime alter while 22(5.2%) rarely alter. 345(83.1%) intentionally discontinue medication against Doctors advice feeling better while 75(17.9%) rarely discontinue. 355(84.5%) take self-medication without reading leaflet/package insert while 65(15.5%) rarely does that. 58 (13.8%) always give prescriptions to someone else while 281(66.9%) sometimes does that. 58(13.8%) take self-medication for long period without advice while 280(66.7%) rarely does that. 328(78.1%) sometimes take drugs from the counter while 92(21.9%) rarely does. 355(84.5%) buy drugs from the store while 65(15.5%) and 10(2.4%) always collect drugs from my neighbour. 345(82.1%) sometimes does while 65(15.5%) rarely does. The overall self-medication practice among youths was that 306(72.9%) had high practice of self-medication while 114(27.1%) had low practice of self-medication. The findings are in agreement with that of Shehnaz, et al (2013) where it was recorded that self-medication practice was 89% among respondents. The results are in keeping with that of Albatti, (2016) where self-medication among adolescents was high (94.5%). The results are in agreement with that of Naqvi, et al (2016) where high level of self-medication among respondents. Similarly, Abdi, et al (2018) showed that the practice of self-medication was 89.6%. The similarities in results of study could be attributed to similarity in sample of the studies.

The results showed that 90(21.4%) agreed that their reason was for mild illness/ problem too trivial to consult the physician, 164(39.0%) indicated previous experience with the drug, 26(6.2%) indicated lack of time, 58(13.8%) indicated urgency of problem, 43(10.2%) indicated cost of consultation, 39(9.3%) indicated advice from friend (who is not a doctor), 90(21.4%) indicated mild illness/ problem too trivial to consult the physician and 164(39.0%) indicated mild illness/ problem too trivial to consult the physician. The results are in keeping with that of Dönmez, et al (2017) where it was recorded that previous experiences, test fees and availability of drugs. Similarly, Shehnaz, et al (2013) reported that reason for self-medication include mild illness and convenient access among respondents. In the same vain Khalid, et al (2019) recorded that reasons for self-medication include conditions not serious and lack of time. The similarity in findings of the study may be attributed to the availability of drugs poor level of implementation of laws that guide self-medication.

Research question 2: What is the self-medication practice among youths in Abua/Odual Local Government Area of Rivers State based on age?

The findings of this study shows that there is a significant difference betweenin self-medication practice among youths based on age[F(2, 417) = 85.414; p<0.05]. The results are in line with that of Essa, et al(2018) where it was recorded that self-medication practice was differ among age of respondents. The findings are consonance with that of Esan, et al (2018) where it was recorded that age significantly predict self-medication practice (p=0.004). The findings also agree with that of Mitra, et al (2018) which recorded that age significantly predictor of self-medication practice among respondents. Also ALBashtawy, et al (2014) reported self-medication practice and age of respondent. This may be attributed to ease in accessibility to drugs in the regions where the studies where carried out.

Conclusions

Conclusively, the overall self-medication practice among youths was that 306(72.9%) had high practice of self-medication while 114(27.1%) had low practice of self-medication. The results showed that 90(21.4%) agreed that their reason was for mild illness/ problem too trivial to consult the physician, 164(39.0%) indicated previous experience with the drug, 26(6.2%) indicated lack of time, 58(13.8%) indicated urgency of problem, 43(10.2%) indicated cost of consultation, 39(9.3%) indicated advice from friend (who is not a doctor), 90(21.4%) indicated mild illness/ problem too trivial to consult the physician and 164(39.0%) indicated mild illness/ problem too trivial to consult the physician. The findings of this study shows that there is a significant difference betweenin self-medication practice among youths based on age($p<0.05$).

5.3   Recommendations

Based on the findings, the following recommendations are made:

1. The National Drug Law Enforcement Agency should carry out an increase in awareness and continuous education in the community regarding the importance of professional consultation before drug use, the implications of irresponsible self-medication, and the place of responsible self-medication.

2. The Ministry of Health should set Standards be applied to the provision of information and advertisement to ensure responsible self-medication.

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