Prevailing factors influencing the use of Alcohol among Motor cycle Riders in Ikenne local Government in Ogun State .Nigeria

Makinde,Bose , Awomodu Damilola, Oyerinde O.O.(Ph.D)

omonebose@yahoo.com

+234 8038413945

Department of Public Health

Babcock University

Ilishan-Remo, Ogun State.

&

Adeoye, Ayodele, O. (Ph.D)

Department of Education & General Studies

Babcock University, Ilishan-Remo, Ogun State.

ABSTRACT

There has been global concern over road traffic injuries. According to the World Health Organizations (2004), one-quarter of injury fatalities are due to traffic crashes with 90% occurring in low- and medium-income countries. Many countries in Africa, including Nigeria, are considered low and medium countries. A descriptive survey method design was used in carrying out this study. A total sample of 230 motorcycle riders in Ilishan-Remo Ogun State wre administered 230 questionnaires and the response rate was 100%. The data collected was analysed using descriptive statistics such as percentages tables and chart. From the study, it is apparent that majority of the respondents were exposed to alcohol at a very tender age between 15-24years of age, they take alcohol daily. Obviously they are addicted to alchol and they cannot go a whole day without alcohol consumption. Majority of the respondents 142(61.8%) are aware of the health hazards associated with alcohol consumption and 104(45.3%) are aware that excessive alcohol could cause liver trouble. It was also

revealed that majority of the respondents 126(54.7%) spend most of their daily income on alcohol and as such affects their socio-economic status. It was revealed that the majority of the respondents126(54%) tried to quit drinking for a period of time and started back in a day or two. There is therefore a need for an effective intervention/ programmes to enlighten them or expose them to the implications of alcohol consumption.

Introduction

There has been global concern over road traffic injuries. According to the World Health Organization (2004), one-quarter of injury fatalities are due to traffic crashes with 90% occurring in low- and medium-income countries. Many countries in Africa, including Nigeria, are considered low and medium income countries.

It is well documented that motorcyclists constitute a high proportion of fatalities in traffic crashes (Owoaje *et al,* 2004) In Nigeria, a dwindling economy and the decay of infrastructure has led to the emergence of motorcycles for commercial transportation (popularly called Okadas) over the past two decades(Borges, 2004). Up to early 90s, the use of motorcycles (Okada) for commercial transportation was not as rampant as we have in virtually all the states of the Federal Republic of Nigeria and the Federal Capital Territory today. The reason advanced for this development by many is the worsening transportation system, while some claim that it is the fallout from the increasing rate of unemployment and underemployment in Nigeria. Whatever may be the reason, it is an undeniable fact that the high number of Okada on Nigerian roads is gradually changing the face of commercial transportation and road safety in Nigeria for the worst (Owatunmise J. 2010). During this time, Okadas often were involved in various forms of traffic crashes. Some of these crashes have been associated to riding the Okadas under the influence of alcohol (Hedlund 2008). Majority of the Okada riders are fond of drinking alcoholic beverages, alcoholic drinks

soaked with Indian hemp. A trip to any Okada park as early as 8am will reveal a lot of disgusting sights concerning their level of drug addiction and this habit continues among them till late in the night (Owatunmise J. 2010).

Alcohol is any of a class of organic compounds characterized by one or more hydroxyl (OH) groups attached to a carbon atom of an alkyl group (hydrocarbon chain). In Nigeria it is called 'ogogoro', 'kainkain', 'abua first eleven', 'agbagba', 'akpeteshi', 'aka mere', 'push me, I push you', 'koo koo juice', 'crazy man in the bottle', or 'Sapele water' depending on locality. (Williams, 2007).

Alcohols may be considered as derivatives of water in which one of the hydrogen atoms has been replaced by an alkyl group. Alcohols are among the most common organic compounds and are valuable intermediates in the synthesis of other compounds

Alcohols may be classified according to which carbon of the alkyl group is bonded to the hydroxyl group. In primary alcohols (RCH_2OH), the oxygen of the hydroxyl group is bonded to a carbon atom bearing at least two hydrogen atoms. In secondary alcohols (R_2CHOH)the hydroxyl group is bonded to a carbon attached to two other carbons, while in tertiary alcohols (R3COH) it is bonded to a carbon attached to three other carbon atoms (Lachenmeier *et al* 2008).

The modern conflict over drinking reflects the complex interactions of the individual with small groups and larger society. Small groups, formed by common interests in business, occupation, recreation, neighbor hood, politics, ethnicity, or religion, use communal drinking to facilitate mixing, engender solidarity, reduce normal inhibitions against trust and promote collaboration with “strangers,” symbolize and ratify accord, and ensure that gatherings for celebration will succeed as festive occasions (Naimi *et al* 2006). Individuals use alcoholic

beverages as an agreeable effector of desired mood alteration, such as altering dysphoric mood or masking unease and pain, and to enable participation in the various small groups with which they are required to associate (Ogden 2007). Given favourable contexts and consensual practices, moderate amounts of drink have an integrative function within families and in common-interest groups. This is thought to account for the survival of drinking customs from early times in spite of the problems drinking has engendered and the opposition it has provoked (Naimi *et al,* 2006)

Alcohol is a drug that affects the central nervous system. It belongs in a class with the barbiturates, minor tranquilizers, and general anesthetics, and it is commonly classified as a depressant. The effect of alcohol on the brain is rather paradoxical. Under some behavioral conditions alcohol can serve as an excitant, under other conditions as a sedative. At very high concentrations it acts increasingly as a depressant, leading to sedation, stupor, and coma. The excitement phase exhibits the well-known signs of exhilaration, loss of socially expected restraints, loquaciousness, unexpected changes of mood, and unmodulated anger (WHO, 2004). Excitement actually may be caused indirectly, more by the effect of alcohol in suppressing inhibitory centres of the brain than by a direct stimulation of the manifested behavior. The physical signs of excited intoxication are slurred speech, unsteady gait, disturbed sensory perceptions, and inability to make fine motor movements. Again, these effects are produced not by the direct action of alcohol on the misbehaving muscles and senses but by its effect on the brain centres that control the muscle activity.

Inadequacies of mass transportation system in the country (Nigeria) have encouraged the use of motorcycles for commercial public transportation in virtually every city in Nigeria (Akinlade & Brieger, 2003). Bad roads with attendant traffic congestion as well as ability of these motorcyclists to meander through traffic jam have encouraged the patronage of this

mode of transportation as other means of transportation may not be able to access some roads.

Globally, deaths and injuries resulting from road crashes are a major and growing public health problem. WHO (2004) stated that more than 20 million people are severely injured or killed on the world's roads each year and the burden falls most heavily on low-income countries (LICs) in Africa, Latin America and Asia. In most high-income countries, cars make up the largest proportion of the road traffic, while in low income and middle-income countries pedestrians and riders of bicycles, motorcycles and mopeds are more common. These differences in road users have an important impact on the occurrence of injuries among the different types of road users. Generally, pedestrians and riders of bicycles, motorcycles and mopeds are less protected from accidents per kilometres traveled and they are at far greater risk than the drivers and passengers of cars and motor vehicles (Owoaje *et al.*, 2005). Motorcyclists and their passengers are vulnerable to speed, poor visibility and those without safety helmets are particularly at risk. The declining Nigerian economy has led to an increase in the use of motorcycles for private and commercial transportation despite the clear evidence of higher incidence of road traffic accidents and injuries among motorcyclists from other countries of the world; and Owoaje *et al.* (2005) stated that Alcohol use was found to be significantly associated with the occurrence of road traffic accidents among the motorcyclists in rural communities in south western Nigeria. Impairment by alcohol has been identified as an important factor influencing both the risk of road traffic accidents and the severity of injuries by various researchers (Romoao, *et al.*, 2003).

National Highway Traffic Administration (2002), stated that motorcycles are the most dangerous type of motor vehicles to drive - at a rate of 35.0 fatal crashes per 100 million miles of travel, compared to just 1.7 fatal crashes per 100 million miles of travel by passenger

cars. A study of rural commercial motorcyclists in Nigeria by Amoran *et al*. (2006) indicated that in a single year, about 46% of respondents were involved in at least one road accident. Nonadherence to safety measures and poor road conditions has been noted to contribute to the spate of commercial motorcycle accidents in Nigeria (Oginni *et al.* 2007). It is however not questionable that the reported high rate of use of intoxicants among commercial motorcyclists is a major contributory factor (Adako 2007). According to Branas & Knudson 2001, intoxicated motorcyclists are also less likely to protect themselves by wearing crash helmets, thus aggravating road accident occurrences. However, another study of motorcyclists by Pillegi *et al.* (2006) found that routine helmet use was higher among current smokers and alcohol drinkers, while as well confirming the prevalence of accidents among motorcyclist engaged in risky behaviours that included intoxication and use of mobile phone while driving. (Cabiker 2008) posited that in more than half of motorcycle fatalities, alcohol use was the key ingredient, and that significantly higher levels of alcohol use are attributable to motorcycle riders than car drivers. Indeed, the leaders of commercial motorcyclists associations in Nigeria admitted complicity of their members regarding use of intoxicants and that most commercial motorcycle accidents were traceable to use of intoxicants (Adako 2007). Other empirical evidences for the use of intoxicants (alcohol) among commercial motorcyclists was provided by the work of Ngim & Udosen (2007), who found that about 35% of commercial motorcyclists in their study used alcohol to 'enhance job performance'. Commercial motorcyclists are, however, not particularly undesirable in Nigeria's drive for socioeconomic development. Their contribution to social life and poverty reduction cannot be overlooked. The problems associated with the failure of rail transport, scarcity of taxis and buses have been eased, by appreciable degree, by the ubiquitous commercial motorcyclists. The relatively low costs of purchase and operation/maintenance of commercial motorcycles keep attracting numerous job seekers, thus helping to reduce unemployment, particularly

among school and college graduates (Oginni et al. 2007). But working under the influence of intoxicants, however, portends unfavourable consequences for the operators, their customers, and the society at large.

STUDY POPULATION

The study population for this study was all motor cycle riders in Ilishan Remo, Ogun State and they were all male.

SAMPLE SIZE DETERMINATION

The total population sampling technique was used for this study. The total population in the study area was 230; therefore, questionnaires were administered to all the motorcycle riders in the study population.

INSTRUMENTATION

A semi-structured questionnaire which consisted of both opened- ended and closed- ended questions were used in carrying out the study. See Appendix for more details.

VALIDITY AND RELIABILITY OF THE INSTRUMENT

To help ensure the validity, the supervisor reviewed the questionnaire and the questionnaire was validated through pre-testing. The sample of the questionnaires was administered to ten (30) motor cycle riders in Ikenne community for pre-testing and the result of the pre-test showed that the respondents understood what was asked of them and also that the questionnaire was moderately reliable.

DESCRIPTION OF INSTRUMENT

The data for this study was collected using a descriptive research procedure, namely questionnaire. This allowed for objectivity, intensity, and standardization of the responses. A 30 item questions was used.. The questionnaire consisted of four (4) sections namely:

Section A: Socio demographic characteristics such as sex, age group, marital status, religion and educational background. Section B: identified the level of Alcohol Consumption. Section C: identified the Reasons for Alcohol Consumption. Section D: determined the Health, social and Socio-economic implication of alcohol usage.

DATA GATHERING PROCEDURE

The researcher attended motorcycle riders meeting held at Ilishan Town Hall, and got the total population of the motorcycle riders to be 230, as well as the number of units and the total number of each motorcycle riders in each unit. Therefore, questionnaires were administered on the motorcycle rider at all the units. Some of the respondents were illiterate; so it was interpreted and translated to Yoruba for proper understanding.

3.9 DATA ANALYSIS

The data from the questionnaire was retrieved, coded and analyzed using Statistical Package for Social Science (SPSS) version 16.0. The statistics tool that was used for the analysis was simple percentage, and frequency distribution .

Results

The level of Alcohol consumption.

Variable	AGREE	DISAGREE	UNDECIDED
Are you addicted to alcohol?	**118 (51.3%)**	**81 (35.2%)**	**31 (13.5%)**

Variable	AGREE	DISAGREE	UNDECIDED
I need a drink to get started in the morning or to stop the shakes (if you do experience any)	**103 (44.8%)**	**97 (42.1%)**	**30 (13.0%)**
I tried to quit drinking for a period of time and started back in a day or two.	**126 (54.7%)**	**61 (26.5%)**	**43 (18.7%)**
I can go a whole day without taking alcohol.	**90 (39.1%)**	**103 (44.8%)**	**37 (16.1%)**
I try to limit my drinking to certain times of the day or to certain place.	**134 (58.3%)**	**61 (26.5%)**	**35 (15.2%)**

The above table 4.2.1 shows that majority of the respondents 118(51.3%) agreed that they are addicted to alcohol, 81 (35.2%) disagreed while 31(13.5%) are undecided. 103 (44.8%) of the respondents agreed that they needed a drink of alcohol to get started in the morning, 97 (42.1%) disagreed while 30(13.0%) were undecided. 126 (54.7%) of the respondents agreed that they tried to quit drinking for a period of time, 61 (26.5%) disagreed while 43 (18.7%) were undecided. 90(39.1%) agreed that they can go a whole day without alcohol, 103 (44.8%) disagreed while 37 (16.1%) were undecided. 134 (58.3%)agreed that they tried to limit their drinking to certain times, 61 (26.5%) disagreed while 35 (15.2%) were undecided.

4.2.2 Research Question 2: Why do motor cycle riders take alcohol?

Table 4.2.2: Reasons for taking alcohol

Reasons for taking alcohol	AGREE	DISAGREE	UNDECIDED
I take alcohol because it makes me feel good.	**129(56.1%)**	**83 (36.1%)**	**18 (7.8%)**
I take alcohol because it gives me	**123 (53.5%)**	**72 (31.3%)**	**35 (15.2%)**

Reasons for taking alcohol	AGREE	DISAGREE	UNDECIDED
the necessary boost I need for the day.			
I take alcohol because my friends do.	**111 (48.2%)**	**67 (29.2%)**	**52 (22.6%)**
I take alcohol because my parents (s) do/did.	**57 (24.8%)**	**131 (56.9%)**	**42 (18.3%)**
I take alcohol because it makes me forget my worries/problems.	**143 (62.2%)**	**61 (26.5%)**	**26 (11.3%)**

The above table 4.2.2 shows that majority of the respondents 129 (56.1%) agreed that they take alcohol because it makes them feel good, 83(36.1%) disagreed while 18(7.8%) were undecided. 123(53.5%) agreed that they take alcohol because it gives them the necessary boost, 72(31.3%) disagreed while 35(15.2%) were undecided. 111(48.2%) agreed that they take alcohol because their friends do, 67(29.2%) disagreed while 52(22.6%) were undecided. 57 (24.8%) agreed that they take alcohol because their parent do, 131 (56.9%) disagreed while 42 (18.3%) were undecided. 143(62.2%) agreed that they take alcohol because it makes them forget their worries, 61(26.5%) disagreed while 26(11.3%) were undecided.

4.2.3 Research Question 3: What is the level of awareness of health implication of alcohol use?

Table 4.2.3: Level of awareness of health implication of alcohol use

Awareness of health implication	AGREE	DISAGREE	UNDECIDED
Are you aware that are health hazards associated with excessive alcohol consumption?	**142 (61.8%)**	**69 (30.0%)**	**19 (8.3%)**
Are you aware that excessive alcohol drinking could cause liver trouble?	**104 (45.3%)**	**73 (31.8%)**	**53 (23.0%)**

Awareness of health implication	AGREE	DISAGREE	UNDECIDED
Cirrhosis?			
Are you aware that excessive alcohol drinkers could end up in a hospital or on a psychiatric ward of a general hospitalwhere drinking was part of the problem?	**100 (43.5%)**	**85 (37.0%)**	**45 (19.6%)**

The above table 4.2.3 shows that majority of the respondents 142(61.8%) agreed that they are aware of health hazards associated with excessive alcohol consumption, 69(30.0%) disagreed while 19(8.3%) were undecided. 104 (45.3%) agreed that they are aware that excessive alcohol drinking could cause liver trouble, 73(31.8%) disagreed while 53(23.0%) were undecided. 100(43.5%) agreed of being aware that excessive alcohol drinkers could end up in a psychiatric hospital, 85(37.0%) disagreed while 45(19.6%) were undecided.

4.2.4 Research Question 4: What are the health and social implication from the use of alcohol?

Table 4.2.4: Health and social implication from the use of alcohol.

Health and social implication	AGREE	DISAGREE	UNDECIDED
I have been hospitalized because of my drinking.	**81 (35.2%)**	**136 (59.2%)**	**13 (5.7%)**
Have you ever felt that you constitute a nuisance to your family and society at large because of drinking or drunken behavior?	**61 (26.5%)**	**79 (34.3%)**	**90 (39.1%)**

Health and social implication	AGREE	DISAGREE	UNDECIDED
Alcohol has earned me respect among my friends and family?	**116 (50.4%)**	**101 (43.9%)**	**13 (5.7%)**
My spouse (or parents) worry or complain about my drinking.	**134 (58.3%)**	**53 (23.0%)**	**43 (18.7%)**
Drinking has created more problems between me and my spouse.	**114 (49.5%)**	**102 (44.4%)**	**14 (6.1%)**
I have gotten into fights when drinking.	**106 (41.6%)**	**103 (44.8%)**	**21 (9.1%)**

The above table 4.2.4 shows that majority of the respondents 81(35.2%) agreed that they have been hospitalized because of their drinking, 136(59.2%) disagreed while 13(5.7%) were undecided. 61(26.5%) agreed of constituting a nuisance to their family and society at large because of drinking or drunken behavior, 79(34.3%) disagreed while 90(39.1%) were undecided. 116(50.4%) agreed that alcohol has earned them respect among their friends and family, 101(43.9%) disagreed while 13(5.7%) were undecided. 134(58.3%) agreed that their spouse (or parents) worry or complain about their drinking, 53(23.0%) disagreed while 43(18.7%) were undecided. 114(49.5%) agreed that drinking has created more problems between them and their spouse, 102(44.4%) disagreed while 14(6.1%) were undecided. 106(46.1%) agreed that they have gotten into fights when drinking, 103(44.8%) disagreed while 21(9.1%) were undecided.

4.2.5 Research Question 5: What are the results of alcohol use on their socio-economic status?

Table 4.2.5: Results of alcohol use on their socio-economic status.

Variable	AGREE	DISAGREE	UNDECIDED
Do you spend most of your daily income on alcohol?	**126 (54.8%)**	**79 (34.4%)**	**25 (10.9%)**
Do you still work when drunk?	**84 (36.6%)**	**132 (57.4%)**	**14 (6.1%)**
Have you had accident because you were drunk?	**112 (48.7%)**	**105 (45.7%)**	**13 (5.7%)**

The above table 4.2.5 majority of the respondents 126(54.8%) agreed that they spend most of their daily income on alcohol, 79(34.4%) disagreed while 25(10.9%) were undecided. 84 (36.6%) agreed that they still work when drunk, 132(57.4%) disagreed while 14(6.1%) were undecided. 112(48.7%) agreed that they have had accident because they were drunk, 105(45.7%) disagreed while 13(5.7%) were undecided.

DISCUSSION

From the study, it is apparent that majority of the respondents were exposed to alcohol at a very tender age between 15 -24 years of age. They take alcohol daily, obviously they are addicted to alcohol and they cannot go a whole day without alcohol consumption. This is in line with alcohol-related traffic fatalities among youth and young adults - United States, 1982-1989 that about 7,000 young people between 15 and 24 years old died in alcohol-related crashes.

The study also shows that parents were not inhibiting factors to their alcohol consumption but rather the factors that predisposed to the use of alcohol were friend. Thus they earned more respect among their friends. Another factor is that it gives necessary boost for the day, because it makes them feel good and makes them forget their worries/ problems.

Most 181(78.8%) of the respondents live in a room apartment and they spend most of their daily income on alcohol, this shows the result of alcohol use on their socio-economic status and as such affects their socio-economic status.

The majority of the respondents 142 (61.8%) are aware of health hazards associated with excessive alcohol consumption and 104 (45.3%) are aware that excessive alcohol drinking could cause liver trouble (cirrhosis). Despite their level of awareness, they still consume it to a very large extent. Most of the respondents 112(48.7%) had had accident because they were drunk. This is in line with (Mvalenti et al, 2010), who identified that 66% of accidents were due to alcohol use.

5.2 CONCLUSION

Motorcycle riders mainly are young males with a low level of education. Few respondents take alcohol because they feel like taking it while some take it to make them bold or brave. Results of the analysis attest to the influence of peer pressure on alcohol consumption. Besides that, motorcycle riders are not ignorant of the implications of alcohol; they just don't care about it. Result of the analysis shows the need for alcohol breath test.

5.3 RECOMMENDATIONS

From the study, it was revealed that the respondents are aware of the health implication of alcohol consumption but do not have an in depth knowledge, also the respondents tried to quit drinking for a period of time and started back in a day or two. Therefore, there is a need for an effective intervention programmmes to enlighten them more or exposed them more to the implications of alcohol consumption. Here, the respondents will be assisted on how to reduce alcohol consumption and finally stop drinking.

Due to the nature of their work, the appropriate time for the programme should fall during their monthly meeting and it should be a continuous programme.

Expose them to other mixture of herbs without adding hot drinks or alcohol because okada riders take alcohol herbs mixed with alcohol for back ache, waist pain and other pains.

Discourage the sale of alcoholic herbs like ‘paraga’, opa eyin’, ‘ogidiga’, te le ano’, near motorcycle parks.

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