"TAKE LITTLE WINE FOR YOUR STOMACH" (1Tim 5,23) AN EXCUSE FOR CULTISM, ALCOHOLISM AND DRUG ABUSE IN NIGERIA TERTIARY INSTITUTIONS?

Dominic Obielosi

Email: dobielosi@yahoo.com

Justice Ihetu

Email: justiceihetu@gmail.com

Chiamaka Chigbo

Eamil: chigboamaka5@gmail.com

Department of Religion and Human Relations Nnamdi Azikiwe University, Awka

Abstract

On the 1st of May 2019, Nigerians were greeted with the news of a hundred (100) level student of Federal University of Technology Owerri (FUTO) who passed out in a room. It is not news that somebody died because death is what we experience virtually every day. The death of this hundred (100) level student of Engineering became news because she was found highly intoxicated with hard drugs littered all over the room. Involvement in drug abuse among our youths especially in institutions of higher learning has remained consistently on a geometrical rise. Some get into this for fun and ecstasy. Close to drug abuse is the ever-increasing number of youngsters enrolling into cultic groups. Often clash between different cultic groups lead to loss of lives and properties yearly. University freshers are often easy victims to initiations into confraternities. To be sure they get deeper into their cultic life and the consequent criminalities, they are pressured into getting "high" with hard drugs and strong alcoholic drinks. It is the belief of this paper that the culture of drug abuse, cultism and alcoholism bedevilling our tertiary institutions are the remote causes of many social problems in these higher institutions ranging from insecurity, unrest, suicide, robbery and poor academic performance in our schools of higher learning. This paper studies these issues highlighted from the perspective of historicity, statistical data collection and referential points to prove that unless something is done about cultism, drug abuse and alcoholism in our institutions, our youths will continue to drift from worse to worst. 1Tim 5,23 is interpreted with exegetical lens as some cite it to excuse their addictions.

KEY WORDS: Alcoholism, Drug, Abuse, Tertiary Institution

INTRODUCTION

There are three great giants standing against our dreams in life. Each has a murderous capacity against our success syndrome. Unfortunately, these enemies of our visions are apparently compulsively attractive but truly inherently deceptive. Most disappointedly, their victims especially among the youth is on a geometrical increase. These dream killers are drugs, alcohol

and cultism. The three vices go together. If one is involved in one, the propensity to get into others is on the high side. Keogh (2010), a drug addict has this to say about herself:

I was twenty-seven years of age and I had been in and out of treatment centres since I was thirteen. I had tried everything: religious retreats, locking myself into my bedroom and going through cold turkey, holistic therapy. I had been to Cuba, Texas and Italy in search of a cure for my addiction, but even travelling around the world didn't work. I now know that it was because I had never got clean for the right reasons. It was either for my family's sake, or because I had burned so many bridges and had run out of people to fool and manipulate. I

had been given so many chances without having to work for a thing. Every excuse under the sun had been exhausted by me to enable my drug use. People eventually grew tired of my lies and false promises and it was only a matter of time before I was left on my own. Between 2004 and now, 2006, I had been more or less left to my own devices: people got on with their lives and I was the one who was left in the gutter ... I was fooling no body but myself. I could no longer point my finger and blame others for my addiction (p.9).

Unfortunately, addiction is no respecter of persons and time. No addict can pinpoint the exact moment he/she became an addict. It does not happen overnight. It begins with a trial. Trial is followed by irresistible desire to continue with flimsy excuses that one can always stop whenever he wants. It gets to a point that much damage is done already and yet the victim hardly realizes the harm. Drug and alcohol addiction include abuse to items like:

- Alcohol
- Methamphetamines
- Opioids, including Prescription Pain Medications
- Stimulants
- Tobacco

Some have gone to extremes to smoke even petrol, snipper and other substances just to get high.

Cultism is another menace plaguing our tertiary institutions. Many young people get initiated into different cultic groups partly for peer group syndrome and also as one of the effects of substance abuse.

A look at our tertiary institutions today show that many young people are into one or all these vices. Some give flimsy excuses to justify their involvement in these. Some make recourse to the bible quoting 1Tim 5,23 to right their wrongs. They argue that St. Paul told Timothy to take wine for his stomach. This paper examines in detail the history of cultism in schools, causes of addiction to drugs and alcohol, and statistics of abuses. It views 1Tim 5,23 with exegetical prism to understand what really the author intends. Recommendations are given as to possible ways of getting free from these maladies.

ADDICTION IS A DISEASE

Substance dependence is when an individual persists in use of alcohol or other drugs despite problems related to use of the substance, substance dependence may be diagnosed. Compulsive and repetitive use may result in tolerance to the effect of the drug and withdrawal symptoms

when use is reduced or stopped. Addicts are not simply bad people that cannot control themselves. Addiction is a disease (Adams, 2015). Unfortunately, most addicts are in the dark about this truth. The United States National Institute on Drug Abuse (NIDA) defines addiction as "a chronic, relapsing brain disease that is characterized by compulsive drug seeking and use, despite harmful consequences". Further, the American Society of Addiction Medicine (ASAM) also recently revised its definition of addiction to state that "Addiction is a chronic brain disorder, and not merely a behavioural problem or simply the result of taking the wrong choices". It is therefore understandable why people especially the young people see addicts and how they ended up and still get into the same issues. People frown at alcoholics and still get into the same mess. People visit psychiatric hospitals. They see the condition of drug addicts. Not long they still end up in the same condition. It is not just about lack of self-control. It is not just a matter of bad friendship. It is a disease. Unfortunately, the complex nature of addiction makes it a psychosomatic disease. Dr. Michael Miller, former president of ASAM, holds that "At its core, addiction isn't just a social problem or a moral problem or a criminal problem. It's a brain problem whose behaviors manifest in all these other areas. Many behaviors driven by addiction are real problems and sometimes criminal acts. But the disease is about brains, not drugs. It's about underlying neurology, not outward actions". Summit Behavioural Health Magazine submits that, addiction is a chronic disease that affects the reward structure of the brain. It is caused by neurochemical reactions that are prompted by the introduction of certain substances and behaviours. Addiction impairs a person's judgment, physiological independence and emotional well-being.

No one is born an addict. Every person is a potential addict. Addiction is no respecter of persons. It is not a magical experience. It is not even accidental nor instantaneous. It begins a day and progresses gradually. Generally, no one plans or desires to be an addict. The common thought is 'I know I can always stop'. 'I can control myself'. It then gets to a point where the will to stop gets so weak. Deep down, the person wants to quit but one only sees that he cannot. One promises himself each time that he must stop but then, falls back the next moment. Keogh (2010) sharing her experience on how she became an addict has this to say:

When people ask me how I got into drugs, I can't pinpoint the exact moment. There was no one single incident which set me along that path. I didn't turn overnight from a bright, well-behaved little girl, who always did her homework and loved clothes and her friends, to the damaged young woman I became, full of hurt and self-loathing, unable to see how anyone could get through life without drugs.

Addiction as a disease manifests itself in three moments: as a mental obsession, chronic and/or progressive disease. Mental obsession is a thought process over which one has no control. It is a maddening urge that lures you to drink, smoke or fornicate when at times one knows that the result will be disastrous. It comes like a compulsive preoccupation. It is so irresistible that you just see yourself in the same act you believed you would not indulge in again. One sees himself promising that he would not go back to the same thing. Just a day or two, he relapses again. He can keep telling himself that he is not addicted. He fools himself into believing that he can stop whenever he wants. He goes on and on until he is chronically obsessed.

Addiction becomes chronic when it is incurable or needs a long-term treatment. It may result in death if not handled. Some addicts have ended up in suicide. Addiction is progressive when it gets worse over time. It never gets better. It is often very subtle that the addict is completely unaware of the point at which he lost control. The regrettable thing is that as soon as the control is lost, it can hardly be regained. You keep craving for more.

The good news in all these is that an addict is sick. He must be aware of this. He must not see himself as a bad person who can no longer make it. The truth is that you are sick. You need to take some serious steps to get well. It is possible if you truly want it. Adams believes that "Reaching a point of 'surrender' and starting the road to recovery requires that you be willing to honestly take a look at yourself and take some action".

Historical Development of Cultism in our Tertiary Institutions

Cultism as an organization dates back to the sea dog confraternity (a.k.a Pyrates) in the 1950s. They were quite peaceful organization at their inception and not violent inclined. Gradually, they became a dreaded, secret organization unleashing menace to different university, communities and the Nigerian society at large. Destruction of lives and properties, maiming and threatening their fellow students and lecturers has become their common features. The jail term attached to any found guilty of cultism have not deterred and discouraged many from being members of these groups. The efforts of many universities to dissuade the members have also failed. The orientation programme at the reception of the fresh students is characterized by lectures exposing the dangers of cultism have been taken serious by students. The anti-cult bye-laws provided by the students often has clause stating punishments for any caught/discovered a cultist. It looks as if the very many attempts dogged efforts to stamp out/put into curbing this menace both by the government, non-governmental organization are not enough.

Ajayi. Ekundayo and Osulasi (2010) argue that cultism in Nigeria dates back to pre-colonization when a group of people with the aim of seeking protection of their ancestors conducted rituals. Well, one may not actually tag such religious inclination as cultism in the sense which it exists in our schools. The noble laureate Prof. Wole Soyinka by 1950 formed the Pyrates confraternity. The aim of this group was a social one, according to Birabil and Okanezi (2017), a group whose aim was to:

- Serve as a vanguard for social freedom of students
- Opposing the growing tyranny of university authorities, and
- Challenging European cultural imperialism and colonial mentality of campus life of the time (p. 171)

Separatist group by 1970's founded the Buccaneers confraternity, the black axe. Other universities in Nigeria by 1970's began to establish indigenous cult groups. By 1978, University of Ilorin created the Mafia confraternity, the Supreme Vikings and others which were seen in higher institutions. Today more than 60 of such groups are regularly formed in our universities, Polytechnics and College of Education. These members who could not meet up with the requirements of the foremost confraternity, Pyrates, formed dissident whose aim and objectives do not align with their former group. With time, they became violent and anti social. The point is that membership of these groups is on the rise despite all the efforts to discourage students from

all forms of cultism. Consequently, once they have coerced or convinced a student to join them, they go on with the initiation rite. According to Onodarho (1999):

The various secret groups carry out their initiation in varied forms. But there are three main stages that characterize all cult groups on our campuses. The three stages of initiation include the oral interview, treasure hunting and selection stage (p.6).

The implication of the prevalence of cultism in our schools is vast and if not effectively handled would become very difficult to manage, insecurity not to the institution but to the hosting community and state. This is not just the school management's responsibility rather the government has a serious role to play. It is not surprising to discover many of these cultists' abuse of substance, as Onodarho (1999) puts it, 'You stand a better chance of an abuser of drugs. This is obvious because there is no way you can carry out cult activities without being under the influence of drugs'. (p. 14)

Some factors are responsible for the prevalence of cultism in Nigerian institutions, and they include; Peer influence, a false illusion or promise of protection from other rival groups and difficult lecturers, the gradual rise of similar groups in our cities (outside the social environment) as even secondary students now join these groups. Social decadence cum corruption that is on a large scale in Nigeria, thus, the pressure to obtain financial, political and social benefits illegally by the masses, this fever for quick money has gotten to the youth.

Another is the fast dwindling education standard in our country. Also, the do or die political culture in Nigeria. This attitude of politicians has turned many of our youths and students into thugs and often they make these cultists to unleash violence.

The impacts of cultism are not without its inimical consequences; insecurity in our higher institution is insecurity in our nation. Maiming, killing and destruction of valuable properties, insecurity, destabilizing of school calendar, and fear in schools are some of the effects of cultism in tertiary institution.

Statistics of Drug Abuse amongst Nigerian Students

Over the years, the use of drugs for social rather than prescribed medical reasons has been well documented. Attempts is made here to render a brief statistic on the abuse of most drug substance by most Nigerian students especially those in tertiary institution.

Onofa, Adamson, Ighoroje and Majekodunmi (2016) observed that young people are ruining their lives through their misuse of drugs. According to their research, a comparison with other third world countries reveals that Nigeria ranks among the highest users of dangerous drugs such as alcohol, tobacco, cannabis, benzodiazepines, cocaine and opiums. They equally discovered that there has been a steady increase in the prevalence of drug use and its associated consequences within the last three decades. Klien (1994) concurs to the above findings when he opined that: "Almost all types of psychoactive substances are available in Nigeria due to their spill over into the streets from drug traffickers who use Nigeria as a conduit to transport drugs from South-East Asia (the Golden triangle) and South America (Bolivia Peru and Brazil) to Europe and North America". (p. 659). From this, one can confidently assert that these substances

are always handy and accessible to the users of which students of tertiary institutions constitute a larger part.

Adewuya, Ola, Aloba, Mapayi and Oginni (2006) in their statistical research reported a preponderance of male respondents. This is to say that a greater number of male students in the higher institutions of learning engage in drug and substance abuse. They hinted that the rate of male involvement was up to 69.2%. On specific substance abuse, Onofa et al (2016) conclude that alcohol was the most prevalent lifetime drug of use (34.4%) which is in consonance with many drug surveys that found alcohol as the most prevalent drug of use among university undergraduates. Abayomi et al, Ebirim and Morakinyo, and Adelekan et al (all citied by Onota et al, 2016) reported a prevalence of 40%, 78% and 95.2% respectively.

Makanjunola, Daramola and Obembe (2007) recorded a lower prevalent rate of use of cannabis (6.2%) compared to other Western countries. Other studies among Nigerian students conducted by Tawasu (2005) reported a 2.3-11% rate of cannabis abuse. This is probably, just as Onota et al. (2016) stated, due to high restriction on the substance in Nigeria unlike in most Western countries where the cultivation and use of cannabis are accepted among the citizens by the government.

Other drugs like cocaine and the recently trending tramadol are not left out. However, the prevalence rate of drug use based on gender as Onofa et al (2016) discovered shows that it is predominantly male activity. The majority of students always start the use of drugs in middle-late adolescents, even while still in secondary school. This is thus, an indication that any drug abuse preventive measures need to start much earlier in the students' academic lives to achieve desired objectives. Currently in Nigeria, formal policies on drug abuse are not available in school curriculum. There is need for the inclusion of drug education as part of the health promotion drive in primary, secondary and tertiary schools (Onofa et al, 2016:5).

Causes of Addiction

What the research has outlined here are remote causes of any type of addiction. When necessary it shall point out possible causes for particular addictions. Addiction develops when a person becomes physically, psychologically and emotionally dependent, most often to drugs, sex or alcohol. It is defined by a collection of unique characteristics:

- A chronic inability to abstain from a certain substance or behaviour
- Behavioural impairment or loss of control
- Cravings for a substance or behaviour
- Continued use of a substance, or engagement in a behaviour despite evident consequences, such as financial ruin, damaged relationships or career loss
- Inappropriate or dysfunctional emotional response when access to substance or behaviour is removed

Alcohol or drug addiction can affect almost every aspect of an individual's life, including their relationships, their finances and their professional endeavours. Many people who struggle with addiction experience memory impairment and physical health problems, including chronic disease and disability.

There is no effect without a cause. Addiction is only an effect. There are many possible remote causes of addictions.

One of the primary causes of substance abuse among the youth is rooted the family upbringing. Lack of parental care in a child has disastrous repercussions later in life. Children from broken homes are very vulnerable to substance abuse. The pains coming from lack of love and care as a child can push one into deep-seated sadness. It is certainly true, but one may not realize the depth of the hurt when one is denied early childhood affections. The child needs the affection of both the dad and the mother. A lack in any of these leaves a vacuum in the child's later life. Nature abhors vacuum. The child feels he lacks something. He grows up sad and unfulfilled. Something must be wrong, he believes. The need to calm himself down and relax can lure him into the dangers of alcoholism, drug or sex.

Certain lifestyle factors can also cause addiction including:

- High Stress Levels
- Having a parent with a history of addiction
- Severe Trauma or Injury
- Exposure to substance abuse at a young age
- Mental health conditions, especially mood disorders such as chronic anxiety and depression
- Psychological trauma, including loss of a loved one or chronic loneliness

Other causes include peer group syndrome and bad company; wallowing in anonymity; lack of self-will; frustration and total disorientation with life.

Effects of Addictions

Addiction is by definition a negation. In this little eye-opening work, we are concerned with three dream killers in the youth: drugs, alcohol and sex. It is good to look at their effects separately.

Drugs

Marijuana (Cannabis sativa) or *Igbo* is the commonest drug prevailing among our youths today. It is growing like wild fire. Unfortunately, some members of the law enforcement agency that supposed to checkmate its use are not helping matters. In fact, some of them take it too. In some parts of the world, marijuana is being legalized. It is therefore understandable for many to downplay or question its adverse effects. They hardly see how and why it is dangerous. Legality is not synonymous with rightness. Alcohol is legal too, yet its negative effects are obvious.

Marijuana affects the user's performance in school. According to Adams (2015), "...the fact is that regular or heavy use of marijuana can cause adverse effects on work or school performance and on personal relationships" (p. 133). It was thought previously that marijuana was not an addictive substance. Repeated studies have proven that it is not only addictive but has serious physical or psychological effects on one who quits using it.

Marijuana today could be classed as the 2nd most popular recreational drug used in Nigeria, trailing alcohol. The plant, Cannabis sativa, contains more than 400 chemicals, including delta-9-

tetrahydrocannabinaol (THC), the plant's main psychoactive chemical. THC "is known to affect the brain's short-term memory as well as having an effect on motor coordination, anxiety and an increased heart rate." (Adams, 2015:133). Unlike most other drugs, including alcohol, THC is stored in the fat cells and therefore takes much longer to completely clear the body. This means that the initial effects created by the THC may wear off after an hour or two, but the chemicals will remain in your body for much longer depending on the amount consumed. Thus, it is said in Igbo that "anaghi agwo ara igbo agwo" (madness caused by marijuana is incurable). No matter how it gets into your system, it affects almost every organ in your body, and your nervous system and immune system, too. When you smoke pot, your body absorbs THC right away. You may notice changes in your body right after you smoke.

Smoking pot can increase one's heart rate by as much as two times for up to 3 hours. That's why some people have a heart attack right after they use marijuana. It can increase bleeding, lower blood pressure, and affect your blood sugar, too. Medicals have not yet known if marijuana is linked to higher odds of getting lung cancer. But the process does irritate one's lungs -- which is why regular pot smokers are more likely to have an ongoing cough and to have lung-related health problems like chest colds and lung infections.

Marijuana robs those affected of their initiative, clouds emotions and dulls clarity. It is associated with an increased risk for several different cancers, and with a substantially increased likelihood towards certain psychiatric disorders. Most marijuana addicts have increased appetite. They are compulsive liars, and pilferers. They like staying out day and night. Keogh (2010) has this to say about her family's impression about her character at the height of her addiction:

They could never understand what my life was like now, mitching from school, staying out all day and all night without telling them a thing. I began to lie compulsively about everything, even to my friends. My appetite had disappeared and I was living on packets of crisps and chocolate. My nanny began to notice different things going missing from the house. I needed money to buy my drugs, which I was now taking every day and so I had begun to steal from them: jewellery, clothes, anything that I thought I could sell easily to buy drugs (p.56)

Use of marijuana leads to a desperate desire to use more. The abuse of drugs leads to changes in the structure and function of the brain. Although it is true that for most people the initial decision to take drugs is voluntary, over time the changes in the brain caused by repeated drug abuse can impair a person's self-control and ability to make sound decisions, and at the same time create an intense impulse to take drugs. It makes you forget your world but only momentarily. It makes one withdraw from family and loved ones. The user hardly thinks about any other thing. Drugs come first before anything in his life. Anything can go provided he gets his drug including shop-lifting. They always have burning anger that only drugs can ease. They are ready to fight and even kill any time. Majority of them are sex-maniacs. Birds of the same feather, flock together. Druggers easily know themselves. They avoid good morals and friends and easily get attached to themselves to perpetrate their evil desires. Other physical effects included:

- Dizziness
- Shallow breathing

- Red eyes and dilated pupils
- Dry mouth
- Increased appetite
- Slowed reaction time (If one drives after using marijuana, the risk of being in a car accident more than doubles.)

Detox from marijuana is generally uncomfortable and mostly irritable. Once one stops using it, he may likely experience some discomforting symptoms like insomnia, restlessness, depression, irritability, headaches, anxiety, stomach pain, loss of appetite, nausea, diarrhoea, cough, excess sweating and vivid dreams.

Alcoholism

Alcoholism or alcohol use disorder is the most severe form of alcohol abuse and involves the inability to manage drinking habits. It could be viewed from three categories: mild, moderate and severe. Each category has various symptoms and can cause harmful side effects. If left untreated, any type of alcohol abuse can spiral out of control. Individuals struggling with alcoholism often feel as though they cannot function normally without alcohol. This can lead to a wide range of issues and impact professional goals, personal matters, relationships and overall health. Over time, the serious side effects of consistent alcohol abuse can worsen and produce damaging complications. National Institute of Health suggests that there are five (5) alcoholic sub-types:

- The first type, defined as the young adult subtype, includes young adult drinkers who don't have family histories of alcoholism or co-occurring mental illnesses.
- The second type, known as the young antisocial subtype, also includes young adult drinkers. These people do have a family history of alcoholism, and they also have co-occurring mental illnesses and addictions to other substances.
- The third type, the functional subtype, is middle-aged and successful with a stable job and a supportive family. These are people with a family history of alcoholism, and about a quarter of them have a history of depression.
- The fourth type, the intermediate familial subtype, includes middle-aged people with a family history of alcoholism and a prior depressive episode.
- The fifth type, the chronic severe subtype, includes middle-aged people with family histories of alcoholism, a history of mental illness, and addictions to other substances.

Alcohol abuse has some very noticeable warning signs. At times, they can take longer to surface. Recovery is easier when it is discovered early enough. National Council on Alcoholism and Drug Dependence (NCADD) documents that some warning signs of alcoholism include:

- Tolerance to the impact of alcohol, so more drinking is required to bring about the same effect
- Withdrawal symptoms between bouts of drinking
- Loss of control over how much or how often alcohol is consumed
- A wish to stop drinking, but an inability to follow through

- A tight focus on alcohol, leading to neglect of one's job, family, friends, or hobbies
- Continued use of alcohol, even though it leads to problems

Other common signs of alcoholism include:

- Craving alcohol when you're not drinking
- Putting alcohol above personal responsibilities
- Feeling the need to keep drinking more
- Spending a substantial amount of money on alcohol
- Behaving differently after drinking

Causes of Alcohol Abuse

Alcoholism could be traced to some remote factors. People may turn to drinking in the face of difficulties, like death in the family or job loss. Some other remote causes can potentially trigger long-term alcohol abuse. No one grows up wanting to struggle with alcohol for the rest of life. But alcoholism can be sneaky, creeping into life in ways that are subtle and that can pass by unnoticed. Some causes include:

Peer Pressure: For some, alcoholism begins with peer pressure. These people just don't intend to start drinking, and they may not begin life even enjoying alcohol, but their peers prompt and poke them to drink alcohol. In time, as they comply with these requests from peers, they lose the ability to control how and when they drink.

Mental Illness: For others, alcoholism comes about due to the influence of a mental illness. People like this might start using alcohol as a remedy for a mental health concern like depression or anxiety. In the beginning, the drinks may seem to keep the symptoms of illness under control. But in time, the alcohol can augment the power of these illnesses.

Genes: Research from NIAAA (National Institute on Alcohol Abuse and Alcoholism) also suggests that alcoholism can stem from genes. While the specific "alcoholism gene" hasn't yet been identified, there are known genes that can boost the power of alcohol and reduce the impact of a hangover. People with these gene combinations may get a bigger high from drinking, and they may not feel ill or sick after a long day of drinking. Their bodies just seem primed for alcohol abuse, and that can make them more likely to develop alcoholism.

Parental Influence: Parents may also inadvertently contribute to children's alcohol problems, especially if they model bad drinking behaviours. Kids who grow up in homes with a great deal of drinking may come to see the behaviour as normal. If their parents drink as a coping mechanism for stress or anxiety, kids may come to do the same. In this case, the genes aren't at the root of the problem; it's the behaviours parents' model that causes concern.

Relieve stress: alcohol is a depressant and a sedative. Drinking produces feelings of pleasure. Some people see it as a recourse to reduce daily life stressors. Such can impact the likelihood of developing alcoholism. This is because frequent drinking builds tolerance, requiring you to consume more alcohol in order to achieve the same effects.

Feel good: Alcohol offers a sense of relief from issues bordering one's mind. It provides a break from reality. It serves as an escapee from deep and troublesome concerns. Continual alcohol use to get through the day or week can eventually turn into a serious drinking problem.

Cope with loss: Loss of a family member or friend or even business collapse can take a toll on you emotionally, physically and mentally. Some people drink to ease the grief they are feeling and get through difficult times. Depending on alcohol, even temporarily, can spiral into a drinking problem.

Overcome anxiety: Some people are naturally anxious, causing them to perpetually worry. Drinking lowers an individual's inhibitions and makes them more comfortable in social situations. Over time though, this can lead to addictive behaviours.

Effects of Alcoholism

Drinking too much – on a single occasion or long-term – can have minor, severe or even threatening effect on one's health. Short-term effects of alcohol abuse can be just as dangerous as long-term effects. For instance, drinking can impact your reaction time, causing you to have slow reflexes and coordination. That's why drinking and driving is extremely dangerous. Getting behind the wheel of a car can alter your perception of speed and distance, putting yourself and others at risk.

Several short-term effects of alcohol abuse may produce:

- Slow reaction time.
- Poor reflexes
- Reduce brain activity
- Lowered inhibitions
- Blurry vision
- Difficulty breathing
- Restlessness

Additionally, consuming too much alcohol can affect your long-term health. Some side effects may lay dormant for years before they surface. Because of this, professional medical care is required for proper diagnosis and treatment. Here are some of the long-term health conditions caused by alcohol:

- Brain defects, including Wernicke-Korsakoff syndrome
- Liver disease
- Diabetes complications
- Heart problems
- Increased risk of cancer
- Vision damage
- Bone loss

Alcohol has been linked to over 200 diseases and health issues, including: Fetal alcohol syndrome, Hepatitis, Gastritis, Heart disease, Liver disease, Pancreatitis, Epilepsy, Mouth

cancer, Diabetes, Depression, Stroke, Ovarian cancer, Prostate cancer, Breast cancer, Anaemia, Dementia, Seizures, Gout, Irritable bowel syndrome, Restless leg syndrome, Anxiety.

Even small amounts of alcohol can cause:

- Memory loss
- Balance problems
- Hearing loss
- Slowed reaction times
- Blurred vision
- Anxiety
- Restlessness
- Lowered inhibitions

Alcoholism can also have long and short-term mental effects:

Occasional and moderate drinkers:

- Memory impairment
- Blackout
- Recklessness
- Impaired decision-making

Heavy and/or chronic drinkers:

- Diminished brain size
- Inability to think abstractly
- Loss of visuospatial abilities
- Wernicke-Korsakoff syndrome
- Memory loss
- Loss of attention span

Alcohol, Drugs, Cultism and 1Tim 5,23

Most addicts get stocked to substances because of the ecstatic sensibility one feels under the influence of either alcohol or drugs. Some addicts especially alcoholics cite 1Tim 5,23 as biblical backing to their vice. A brief look at the verse in question seem to give a contrary message.

1Tim 5,23 says ... alla oinō oligō chrō dia ton stomachon. Some later manuscripts like D^2 F G \hat{U} a vg sy insert sou after stomachon. Dia could take accusative or genitive. Blass and Debrunner (2007) explain that dia means 'through' when it takes accusative. Looking at the text, one sees that ton stomachon is in the accusative. The insertion of sou is to make the text appear more meaningful. Application of lectio difficilior and the more ancient nature of the manuscripts that agree with our text make our text closer to the original text. The insertion is by more recent manuscripts. A literal translation of the text would be "... but take a little wine through the stomach".

... alla oinō oligō chrō dia ton stomachon is only a part of 1Tim 5,23. It must be viewed within its context to understand it. V. 22 admonishes Timothy on personal purity and not allowing himself to be contaminated by the sins of others. Immediately, in what looks like an intrusion, the author switched to physical fitness of Timothy. *u'dopotein* means to prefer water for drinking. Bauer (2009) interprets it as an abstemious way of life. It is seen only here in the entire

NT but Dan 1,12 LXX has it. Lock (1978) suggests that it means that Timothy had adopted the rule of entire abstinence from wine, whether for example's sake or from ascetic reasons. Collins (2002) observes that the Pastor emphasizes this injunction with a reminder to Timothy that he keeps himself holy. He then adds the rejoinder that Timothy keeps himself fit and healthy: "No longer drink only water; use a little wine for the stomach's sake and because of your frequent illnesses". Probably because Timothy bears a heavy responsibility for the church of Ephesus (1,3), in 5,22-23 the Pastor expresses his concern that Timothy be spiritually and physically fit for the task at hand. People of ancient times were conversant with gastric problems. As a remedy, Greco-Roman physicians prescribed a bit of wine. The Talmud states that Jewish elders believed wine to be the primary medicine. In urging Timothy to take a little wine, the author is only admonishing him against severe ascetism. Mounce (2000) is of the view that Timothy abstained from wine despite its effect on his health because Paul's opponents were drunkards and he needed to disassociate himself totally from them and their teaching. He chose to abstain to the point that it was hurting him physically. His abstinence was an example of not exercising his Christian liberty when it might damage another's faith (1Cor 8,13; Rom 14,15.21). The text tells the reader something about Timothy as a committed, firm and self-effacing personality. A person of strong convictions willing to do what was best for the Ephesian church to the detriment of his own health.

Breaking free from Drugs and Alcohol

Getting freed from addictions is not generally easy. Addiction to drugs and alcohol is even more difficult to stop. In truth, no one can force an addict to quit addiction. Only the addict can convince himself that he is destroying himself and ought to get cleansed. There are few things one can do to help himself get freed from addiction to drugs and alcohol.

- i. Realize and be aware of the harm one is doing to himself, family and society
- ii. Train the will power to be strong to resist recklessness
- iii. Avoid occasions of smoking and drinking
- iv. Decide neither to buy drugs or alcoholic drinks or even take from others
- v. Avoid going in the company of addicts
- vi. Avoid old friends who just got clean
- vii. In extreme cases, seek for help

EVALUATION AND CONCLUSION

Deeper studies of the meanings of addiction is delved into in the course of this work. Three major addictions are explained including, alcohol, drug and cultism. The three are chosen simply because they are prevalent amongst the youths especially in tertiary institutions. The causes and effects of these addictions are exposed in details. Effort is made to come up with some ameliorative measures to curb addiction. The exegetical part dealing on 1Tim 5,23 shows that the author of the biblical text does not in any way encourage alcoholism or addiction. He is rather concerned about the health of Timothy. In as much as these substances have some positive dividends, their abuse is very detrimental and could be said to be the remote cause of the increase in crime in our tertiary schools and society at large. It has also negatively affected students' performances in school. Since addiction begins with repetitive use of the same substance, the researchers recommend total decalcement and mortification in the use of alcohol, drug and

cultism. It is the firm belief of the researchers that effective control in this area will invariably result in greater sanity, more credibility in morals and better academic performance.

REFERENCES

- Adams, T. (2015): *Safely Detox from Alcohol and Drugs at Home*. How to Stop Drinking and Beat Addiction, Pasadena: Rapid Response Press.
- Adewuya, A.O. et al (2006): "Depression amongst Nigerian University Students. Prevalence and Sociodemographic correlates". *Journal of Soc. Psychiatry Epidemiol*, 41: 674-678.
- Ajayi, I.A. et al. (2010): "Menace of Cultism in Nigerian Tertiary Institutions. The Way Out". *Anthropologist*, 12,3, 155-160.
- Bauer, W. (2009): A Greek-English Lexicon of the New Testament and Other Early Christian Literature, Danker, F.W. ed., Chicago: The University of Chicago Press.
- Birabil, S.T. & Okanezi, B. (2017): "Cultism as ticking time bomb in Nigerian Schools: Challenges and the way forward". *International Journal of Scientific Research*, 10,2, 169-175
- Blass, F. and Debrunner, A. (2007): A Greek Grammar of the New Testament and Other Early Christian Literature, R. W. Funk ed., Chicago: University of Chicago Press.
- Collins, R.F. (2002): *1 & 2 Timothy*. A Commentary, Black, C.C. eds., Louisville: Westminster John Knox Press.
- Keogh, R. (2010): Dying to Survive, Dublin: Gill Books.
- Klein, A. (1994): "Trapped in the Traffic: Growing Problems of Drug Consumption in Lagos". *The Journal of Modern African Studies*, 32: 657-677.
- Lock, W. (1978): A Critical and Exegetical Commentary on The Pastoral Epistles. Edinburgh: T. & T. Clark.
- Makanjuola, A.B. et al. (2007): "Psychoactive Substance use among Medical Students in a Nigerian University". *Journal of World Psychiatry*. 6: 48-50.
- Mounce, W.D. (2000): *Pastoral Epistles*. Word Biblical Commentary. Metzger, B. eds. Nashville: Thomas Nelson Publishers.
- Onodarho, E. (1999): Anchor: Secret Cult Activities on Campus Exposed. Enugu: Snapp.
- Onota, L.U. et al. (2016): "Prevalence and Patterns of Drug Abuse among Students of Tertiary Institutions in Abeokuta, Ogun State, Nigeria". *International Journal of Psychiatry* 1:1-6