



Alcohol abuse in African traditional religion: Education and enlightenment as panacea for integration and development



Authors:

Emeka C. Ekeke^{1,2} D Elizabeth O. John^{1,2} D

Affiliations:

¹Department of Religious and Cultural Studies, Faculty of Arts, University of Calabar, Calabar, Nigeria

²Department of Religion Studies, Faculty of Theology and Religion, University of Pretoria, Pretoria, South Africa

Corresponding author:

Emeka Ekeke, emekacekeke@unical.edu.ng

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Alcoholism is endemic in Nigeria's traditional religion and society. This abuse is especially common at New Yam festivals, Ekpe, Ekpo and Nmanwu masquerades festivals, burial rituals, birth, marriage and naming ceremonies. Some claim that this is driven by specific beliefs and activities in African culture, such as beliefs in ancestors, libation, hospitality and entertaining guests and strangers and the desire to maintain the cultural traditions of the ancestors. Alcohol abuse has generated major health and social issues for abusers, their families and society, plunging families, towns and tribes into crises and conflicts that bring economic and political retrogression. This research studied how the African traditional religion encourages alcohol misuse and how to decrease it for national development. This study was on Nigeria's South-South region. The study uses qualitative and ethnographic research methodologies, including key informants, in-depth and focus group interviews and the reward deficiency syndrome as a theoretical framework. Although African Traditional Religion (ATR) supports alcohol usage, greed, a lack of self-control, peer pressure, indiscipline and lack of moral upbringing led to alcohol misuse, which harms the person, family, community and country as a whole. Education and enlightenment are a remedy to free alcoholics and utilise them for national integration and development.

Contribution: Some say Africans drink a lot because their religious heritage promotes drinking, leading to abuse. However, peer pressure, selfishness, a lack of self-control, bad parenting and not religion push persons with reward deficiency syndrome into alcoholism, according to this research.

Keywords: African traditional religion and culture; religion and alcoholism; drug abuse and religion; religion and national development education and drug abuse; alcohol and enlightenment.

Introduction

Over the last three decades, researches have shown that there is an incessant increase in the level of alcohol consumption and abuse in Africa, especially among youth and teenagers. In 2011, the World Health Organization (WHO) asserts that South Africans consume about 5 million litres of alcohol yearly. With this figure, the country is rated among countries, which suffer alcohol abuse (Amoateng, Setlalentoa & Udomboso 2017). Furthermore, it has been observed that while new brands of alcoholic beverages and industries are introduced into the continent, new marketing strategies are developed to increase the sales of the products in each country, with no laid down policies by lawmakers to regulate the consumption, sale and production of alcohol. Sequel to the high rate of alcohol consumption in the continent many foreign and local investors have drawn conclusions that around the globe Africa has the best market for potential and existing alcohol industries (Getachew et al. 2019).

Interestingly, most of the alcohol consumed in Africa are unrecorded. The reason as explained by Ferreira-Borges, Parry and Babor (2017) and Nwagu, Dibia and Odo (2017) is that some of the alcohols consumed in the continent are locally made by distilling fermented malt grains and palm wine derived from palm trees or by using sugar cane, honey and fruits. On this premise, it has been argued that the practice of artisanal distillation of alcohol in Africa is the result of the high level of alcohol consumption in the continent, an issue prevalent among rural dwellers. Nwagu

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et al. (2017) and Sudhinaraset, Wigglesworth and Takeuchi (2015) attribute the factors responsible for the use and abuse of alcohol around the globe and Africa in particular to sociocultural influence, stating that 'to certain degree what initiates the idea of acceptable foods and drinks in many human societies are the traditions and culture of the people'. It is imperative to notice that in Africa, especially for rural dwellers, socio-cultural norms are products of the traditional religious beliefs of the people. From the ethnographic study of the people on the use of alcohol, it has been observed that the traditional religious beliefs of the people serve as the preponderant factor responsible for alcohol abuse among rural dwellers.

The focus is often on alcohol consumption among teenagers and young adults in educational institutions in the majority of discussions about alcohol use and abuse in Africa. There has not been much discussion of African traditional religion as a contributing factor to this existential quandary. Scholars have mostly disregarded this crucial topic in the present because of the controversial theory that African traditional religions are progressively going out of style because the bulk of indigenous people practices Islam and Christianity. The article makes the case that the abuse is not caused by religion in and of itself, but rather by greed, a lack of self-control, peer pressure, indiscipline and a lack of moral upbringing. Despite the fact that some African traditional religious beliefs and practices - such as reverence for ancestors, drinking, entertaining guests and strangers and the desire to uphold ancestral cultural practices - tend to encourage alcohol use, many people abuse the drug regardless of their religious affiliation.

With the increasing number of alcohol industries and the health and social problems occasioned by abuse of alcohol in the continent, little has been done to sensitise and enlighten rural dwellers on the need to reduce the intake of alcohol. The article asserts that if adequate sensitisation and enlightenment campaign on the effects of alcohol abuse are not carried out, the level of alcohol abuse in the continent will increase directly proportional to the increasing number of alcohol industries in the region. Therefore, the article posits that the plausible panacea to this existential problem bedeviling the continent is an adequate enlightenment campaign and education.

Theoretical framework and methodology Theory of reward deficiency syndrome

According to Blum et al. (2022), reward deficiency syndrome (RDS) is characterised by a breakdown in reward neurotransmission that results in a number of compulsive, impulsive and addictive behaviours. Reward deficiency syndrome is caused by a synthesis of environmental (epigenetic) and DNA-based (genetic) neurotransmission impairments that prevent the regular

satisfaction of human physiological desires (i.e. food, water and sex). Reward deficiency syndrome, according to Blum et al. (2021), unites impulsive, compulsive and addictive behavioural issues. These behaviours have been connected to epigenetic (environmental) changes and genetic variations that result in insufficient reward or pleasure neurotransmission. Reward deficiency syndrome was developed as a result of extensive research into behavioural genetics, which aimed to link genetic, environmental and behavioural patterns in both humans and animals (Blum 2017). Such research paved the way for ground-breaking discoveries that shed light on the neurotransmission's molecular biology, which underlies alcoholism as well as all other addictive and compulsive behaviours. Understanding this idea is crucial for treating chemical and behavioural addictions. The RDS phenomenon has significant implications for the diagnosis and treatment of compulsive and addictive behaviours as well as for the viability of 'free-will' as a useful scientific concept in the discussion of philosophical ethics and morality.

The question of whether or not moral judgement affects addiction has reportedly been debated for a very long time, according to Gold (2020). Is it accurate to say that drug addicts continue to use drugs even if they have no genetic ancestors, or is the opposite true? It is possible that a pre-existing predisposition or susceptibility led to drug addiction. However, a cause may also result in a weakness (Gold 2020).

Because it emphasises that human neurotransmission disorders in combination with contextual factors – rather than a person's religion – are the primary cause of alcohol and other psychoactive substance consumption, this theory is very pertinent to the topic at hand.

Research methodology

The qualitative research technique is used in this study together with an ethnographic research strategy. The qualitative research method, which is more interested in the whys and hows, makes a different kind of meaningful contribution to understanding human realities (Bengtsson 2016; Silverman 2010). Social and behavioural sciences use qualitative ethnography to collect data. Data are collected via observations and interviews to determine how society and people work (Reeves et al. 2008). Ethnography examines social interactions, behaviours and viewpoints in teams, organisations and communities. Early 1900s anthropological studies of tiny, rural (often distant) people led to it. Subsequently, Chicago School sociologists Everett Hughes, Robert Park and Louis Wirth employed this paradigm to study urban social life. Ethnography's main goal is to get deep, full understanding of people's attitudes, actions and the environment they live in via in-depth observations and interviews (Reeves et al. 2008). Hammersley (1992) states that ethnographers record the culture, attitudes and actions of these people.

The researchers have to utilise inductive reasoning to get to conclusions about the facts at hand and use content analysis, to arrange the information and present it objectively and impartially (Berg 2001; Catanzaro 1988; Polit & Beck 2006). The article uses key informant interviews (KIIs), in-depth interviews (IDIs) and focus group discussion (FGD) in gathering data.

African traditional religion, culture and alcohol abuse

One of the difficulties encountered in any research on African traditional religion and culture is the herculean task involved in distinguishing African religious beliefs from African cultural practices: a problem immanent in Judaism as well. African traditional religious beliefs and cultural practices are interwoven and intertwined – their traditional religious beliefs permeate every aspect of the cultural life of the people. For example, the agricultural and masquerade festivals as well as various cultural ceremonies of the people all have religious undertone. Therefore, with the trending issue of alcohol abuse in Africa occasioned by cultural influence, this has propelled scholars to carry out research on the nexus between African traditional religious beliefs and the existential problem of alcohol abuse in the region.

It has been established that the delicacies in Africa and their various drinks are constituents of their culture but the fundamental question that seeks redress is the issue of alcohol consumption in Africa. Historically, the use of alcohol for religious and cultural purposes among traditional Africans is as old as the history of the people. As compared with Christianity and Islam, African traditional religion does not condemn the consumption of alcohol by adherents. Speaking on the religio-cultural consumption of alcohol in African, Dumbili (2013) states categorically that alcohol plays a significant role in the religio-cultural life of the people – it is used during religio-cultural ceremonies such as funeral rites, child dedication, marriages, festivals and chieftaincy coronation. Setlalentoa et al. (2009) posit that among traditional Africans, alcohol served many functions - it was used as a thing of payment and a means of strengthening bonds, but beer was linked with manhood and with the strengthening of the body. To show how important alcohol is in the religio-cultural life of one of the ethnic groups in Africa, Usoro et al. (2018) aver that alcohol drinking is so deified in Anaang land, Southern Nigeria, to the point that a day in their local dialect known as Usen ibet ukot is set aside for free drinks. On this day, people do not pay for drinks, they move from one house to another drinking free bottle of alcohol.

There are different variances of alcoholic drinks in Africa, and each varies from one ethnic group to another. Among some ethnic groups, the consumption of locally distilled gins is prevalent as it is the case in the South-South geopolitical region of Nigeria, while others consume more palm wine. In some cases, the locally distilled gins are consumed as traditional medicine, that is, when it is combined with

different herbs and roots. Awosusi and Adegboyega (2015) emphasised that in Nigeria many consume alcohol (local gin) with the pretext of taking traditional medicine known as 'opa' 'ehin', 'paraga' or 'fidigbodi'. Prior to the modern epoch, alcohol was not a drink consumed by youth; rather it was a beverage meant for adults, but most women consumed alcohol as medication for stomach aches. Contrary to some arguments that on the grounds of its religious and cultural import, there was and is no law enacted against the consumption of alcohol in Africa. Ibanga (2005) asserts that it was consumed occasionally - mainly during religious and cultural festivals and ceremonies, and it was used for entertaining guests. Usoro et al. (2018) corroborate this argument stating that alcohol abuse was not a norm in Africa as drunks were not allowed to take part in confidential and sensitive discussions. This presupposes that alcohol abuse is a modern existential problem linked with the abuse of African religious and cultural practices.

In Africa, past and present, alcohol is one of the major items enshrined in the list given to a would-be husband for traditional marriage rites and to a family as an item for the funeral rites of their deceased. It is one of the items demanded by a traditional religious priest as a gift to appease the gods of the land. Alcohol is used for pouring of libation to the gods of the land and to the ancestors (the living-dead): a common religious practice in Africa. It serves as one of the items used by Necromancers to summon the spirit of the dead and one of the items used by rainmakers to command rain. In Akwa Ibom State, Nigeria, research shows that initiates of *Ekpo* masquerades (a religious and cultural association) are heavy consumers of alcohol. As a result of the cultural and religious value of alcohol among traditional Africans alcohol was consumed occasionally (Usoro et al. 2018).

However, in recent times, it has been observed that a plethora of youth and adult consume excess alcohol (beer, locally distilled gins and palm wine) during funerals and traditional marriages. This has been attributed to the availability of the product during these ceremonies, especially when the families involved want to prove their worth. At this juncture, it becomes imperative to state categorically that African traditional religious beliefs and cultural systems do not support the abuse of alcohol. Although African traditional religion and culture do not prohibit the consumption of alcohol, it does not imply in any sense that they encourage the excessive use and abuse of alcohol. The issue of alcohol abuse in African traditional religion and culture is a recent development and has become an issue that cuts across every religion of the world. For example, it is a known fact that Islam absolutely condemns the use and abuse of alcohol, but Abdulmalik et al. (2009) assert that alcohol abuse has become a serious existential problem among students in informal religious schools [Almajiris] in northern Nigeria. The argument raised here is that regardless of the fact that African traditional religion does not encourage the abuse of alcohol, but its acceptance of the consumption creates the avenue for its abuse. As Moak and Agrawal (2010), as quoted by

Iwuagwu et al. (2020), assert that alcohol consumption and abuse came into being because of its availability and acceptability. With the availability of locally brewed gin and its acceptance by African traditional religion and culture, its abuse is inevitable. Of all the psychoactive substances available in Africa, it has been confirmed that alcohol remains the most abused, and majority of its abusers are youth and teens in rural areas (Iwuagwu et al. 2020).

Generally, there is no strict policy regulating the production, sales and advertisement of alcohol in Africa. Morally, African societies frown at the excessive use of alcohol, but nothing can be done to stop its consumption considering its relevance in African traditional religion and culture. A critical look at the accelerating rate of alcohol abuse in Africa shows that it would not be out of place to state logically that the increase in the number of alcohol industries in Africa is directly proportional to the increasing number of abusers in Africa: a problem that is posing a serious threat to health and progress of the continent. Nevertheless, it is imperative to state categorically that alcohol abuse in Africa marks the transition from the religio-cultural relevance of alcohol to the industrial and commercial or economic benefits. Setlalentoa et al. (2009) aver that the issue of alcohol abuses in South Africa emerged when the country was entering an industrial epoch.

The effects of alcohol abuse on young adults and nation building

The effects of alcohol abuse in Africa are a complex issue as its output is detrimental to the individual, family and the society at large. According to Adeloye et al. (2019), these effects include serious health risks, increased mortality rate, increased road accidents, increased social violence and crime rate including rape and economic problems such unemployment and low productivity. Rumgay et al. (2021) explain that alcohol usage is a major risk factor for the worldwide burden of illness, including cancer. Alcohol intake causes malignancies of the upper aerodigestive tract (oral cavity, pharynx, larynx and oesophagus), colon, rectum, liver and female breast. In 2020, these tumours caused 6.3 million cases and 3.3 million deaths (data from the GLOBOCAN 2020 database). It has been established that alcohol abuse is one of the major causes of death in the world and Africa in particular. Iwuagwu et al. (2020) observed that while there are positive health and economic benefits of alcohol consumption its negative effects are outrageous. Adeloye et al. (2019) explain that there have been rises in a number of connected social and health problems, such as alcoholism, domestic abuse, road accidents and various chronic illnesses, indicating the need for the development of more thorough population-wide preventative measures. The health implications of alcohol consumption are age related, and usually those exposed to alcohol-related diseases are the elderly and young adults. According to the WHO (2018), Nigeria used 23.1 litres of pure alcohol in 2014 and drinkers aged 15 years and over consumed 50.1 g per day. WHO (2018)'s global status report on alcohol and health shows that more than 3 million people died worldwide from

hazardous alcohol consumption in 2016. One in 20 people died. Almost three-quarters of these fatalities were men. More than 5% of worldwide illness is caused by alcohol abuse.

As a psychoactive substance, alcohol consumption distorts the human brain by impairing the user's ability to reason and causing inability to retain things in the memory. Newbury-Birch et al. (2009:4) adumbrate the health consequences of young adult consumption of alcohol to include 'change in appetite, weight loss, eczema, headaches and sleep disturbance and liver disease'. Ekpenyong and Aakpege (2014) explain that the notions about this substance's ability to increase confidence in social situations and to ease anxiety are linked with other socio-emotional issues such as depression, tension and low self-esteem. The WHO in 2014 listed the health problems associated with alcohol consumption to include 'gastrointestinal conditions, cardiovascular diseases, cancer, increased risk of infectious diseases due to a weakened immune system and unintentional injuries'. Buykx et al. (2016) posit that there is a strong connection between alcohol abuse and breast cancer.

It has been observed that many alcohol abusers also consume other psychoactive substances such as cigarette, cannabis sativa, tramadol and many more. Alcohol consumption and abuse in Africa and the world at large have destroyed many lives and have sent many to their early graves. In spite of the health implications or problems associated with alcohol consumption the number of alcohol users in Africa is incessantly increasing at a geometric ratio (Ajayi, Owolabi & Olajire 2019). This is because of the breakdown in reward neurotransmission that results in a number of compulsive, impulsive and addictive behaviours. This RDS compels the person to continue even when his health is impaired (Blum et al. 2022). In contemporary Nigeria to be precise, there has been an overwhelming change in the manner in which alcohol is consumed. Boua et al. (2021) observed that considering the current consumers of alcohol in Africa the number of male users is far more than their female counterparts. However, the most important concern here is the effect of alcohol abuse to nation building. Most of the wanton killings of innocent indigenes citizens during inter and/or intra communal conflicts in Africa are associated with alcohol and drug abuse as perpetrators were under the influence of these psychoactive substances. As a result of the wanton killings many have fled from their home town and agricultural and economic activities have been disrupted.

A participant, argued that:

'When people are under the influence of alcohol, they can do the unimaginable. I have seen and heard of how siblings and relatives stab each other seriously because of the power of alcohol. Alcohol has rendered many of the youths in community useless; some are suffering from Schizophrenia and others are thugs. This is not something only found in community; it is common in Africa as far as alcohol consumption is a tradition of the people.' (Michael Unam, Ikot Abasi, Akwa Ibom State, Nigeria, Focus Group discussion interview)

It is said that youth are the future of a nation, but the reverse is the case when the youths are addicted to alcohol consumption. The social and health implications of alcohol abuse are clear indications that it is against nation building.

Education and enlightenment: A proposed panacea for alcohol abuse in African traditional religion

Many scholars have postulated various strategies and ideas for combating the problem of alcohol abuse in Africa, bearing in mind that the use and abuse of this psychoactive substance vary from one country and/or region to another. For example, in Nigeria, it has been established that the level of psychoactive substance abuse is prevalent in the northern region of the country with drug abuse taking the lead. Although the proposed solution to this phenomenon in Africa may be similar, but the paradigm may not necessarily be the same in all the countries of Africa. Nevertheless, it is pertinent to notice that the appropriate method of proffering solution to an existential problem of this nature is to examine the source of the problem.

Compared with Stone et al. (2006), who attribute the causes of alcohol abuse among American Indians to colonisation, discrimination, internalised racism and prejudice and advocated for enculturation - using traditional practices and traditional spirituality as a remedy to alcohol abuse, the major factor responsible for alcohol abuse in Africa is the misconstrued notion of African traditional religion and culture's acceptance of alcohol consumption. However, other factors include illiteracy (ignorance), poverty, unemployment, peer influence, depression and many more. To curb this menace, there is need for proper or adequate enlightenment programme to sensitise young adult especially rural dwellers on the adverse effects of alcohol abuse. While many young adults are aware that tobacco smoking is dangerous to health, a good number are naïve or ignorant of the health implications of alcohol abuse. As there are no strict rules and regulations control the production, advertisement, sale and consumption of alcohol in Africa, coupled with its acceptance by the culture and traditional religion of the people, for religious, ceremonial and medical purposes therefore, many young adults assume that alcohol has no negative effect. The veracity of the matter is that while enlightenment campaigns are carried out on the effect of the abuse of some psychoactive substances, little or nothing has been done by the government to sensitise the youth on alcohol-related diseases occasioned by its abuse.

From the FGD carried out, most of the participants state categorically that they are not aware of the medical implications of alcohol abuse. All they know about alcohol is that its excessive use intoxicates.

One of the participants, avers that:

'I no know say combine (local gin and herbs) they kill oooo, because we dey drink am plenty like medicine. I get different types of combine for my house. For my village we dey drink am

well well like water, because we dey make am.' (Inyene Ifiok, indigene of Ikot Abasi in Akwa Ibom State, Nigeria, Focus Group discussion interview)

Another participant posits that:

'I know say Ogogoro dey make person loss weight but I no know say e dey kill person. I dey drink well well any time I go my village, my people no dey joke with Kai Kai and Palm wine.' (Ndubuisi Okezie, indigene of Ndoki in Rivers State Nigeria, Focus Group discussion interview)

The level of awareness of the health implications of alcoholrelated illness in Nigeria and Africa at large is staggeringly low. Cooper (2009) observes that alcohol abuse is prevalent among rural dwellers and majority of them are illiterates. If an adequate enlightenment campaign is not carried out and the people are not made to see the need for education, the number of alcohol abusers among young adults in Africa will increase tremendously.

In Africa, many scholars and concerned citizens have raised worries over the high level of alcohol and drug abuse among students of different institutions of learning, especially by those in higher institutions. For example, Adejoke et al. (2019), Zirra (2020), Awosusi and Adegboyega (2015) and Calei and Fazenda (2019), all examined the level of substance abuse among students in secondary schools in Africa, while Ekpenyong and Aakpege (2014), Akanbi et al. (2015), Mbuthia et al. (2017), Amoateng et al. (2017), Ajayi et al. (2019) and others have also brought to light the prevalence of substance abuse in higher institutions of learning in Africa. This has generated a serious controversial question as many in our contemporary society believe that this problem is endemic among students generally. The question is does education or the school environment promote the use and abuse of psychoactive substances? Are there subjects and courses that expose students to the use of psychoactive substances?

One of the participants in response to the given question posits that:

'Education has not and can never be one of the factors responsible for alcohol abuse in Nigeria.' (Bright Onugha a native of Umuosi Ndoki in River State Nigeria, Focus Group discussion interview)

He argues vehemently that the reason students in secondary schools and higher institutions abuse alcohol is the product of peer influence. Zirra (2020) corroborates this assertion, adumbrating the factors responsible to include curiosity, peer group influence, a lack of parental guidance, socioeconomic circumstances, social and emotional pathologies, availability of the substance and advertisement of the products. At the secondary level of education, there are topics in Civic Education on drug abuse and its effects, but there is no compulsory or elective course in higher institutions of learning that enlightens students on the adverse effect of drug abuse; rather different alcohol industries go to different universities in Nigeria to advertise their products. In most public universities, alcohol is sold on campus for students'

consumption, a thing that should not be seen in a place where morality should be held in high reference.

A participant avers that:

I got into alcohol abuse due to the influence of friends and course mates and some emotional problems I had while in the university, regardless of the fact that I was aware of the health implications.' (Effiom Ekpeyong, a native of Ikot Asuquo in Akpabuyo LGA, Cross River state, a graduate, Focus Group discussion interview)

Another participant, states that:

I don't drink alcohol but I have friends and relatives who do. What I can say about this is that, I think they are influenced by the society. You know in this part of the world no one condemns the use of alcohol we only frown at those who abuse it. But, you must understand that once it becomes a habit then abuse becomes unavoidable. My pain is that most of the abusers of alcohol in the city are educated young adult. They did not learn this habit in school rather they got it from the society – relative, friends and neighbours.' (Matthew Ncha, a native of Boki LGA, Cross River state, an elite, Focus Group discussion interview)

Yangyuen et al. (2021) and Yadav and Khokhar (2019) submit that health literacy has a significant role to play in health risk behaviours such as alcohol drinking and smoking. Indeed, the role of education and enlightenment programmes in the fight against alcohol abuse cannot be overestimated. Although in many institutions of learning, alcohol and drug abuse have become the order of the day, we cannot use this as a yardstick to undermine the efficacy of education in the fight against the abuse of alcohol. Mbuthia et al. (2017) from their empirical research on the subject under consideration argue that enlightenment and awareness campaigns against alcohol abuse alone are not enough to reduce the level of alcohol consumption among university students. As plausible as their finding is, the truth is that enlightenment and awareness campaigns do not aim at achieving immediate result, an impression that must be cleared. According to Yadav and Khokhar (2019), the intervention of alcohol abuse through education and enlightenment programmes should start at an early age as it takes time for healthy practices to blend into behaviour. In other words, the efficacy of awareness campaigns and enlightenment programmes is long term because the desired change in human behaviour is a laborious task that requires patience and time.

Considering the rate at which consumers of alcohol are increasing in Africa, radical enlightenment awareness and campaign on the health and social implications of alcohol abuse should be carried out. The United Nations Office on Drugs and Crime (UNODC) under the auspice of the WHO in 2017 adumbrates how alcohol abuse can be controlled using the education sector. It asserts that teachers, health practitioners and other staff working in the institution of learning should be well trained on the strategies to apply. Alcohol abuse should form a discourse in the curriculum, and there should be policies against the use of any psychoactive substances within the school environment. Furthermore, the government should

place a ban on adverts of alcohol and its sale in public places as it creates a positive picture of alcohol consumption. The enlightenment campaigns should be performed through different socio-cultural groups, religious bodies and institutions of learning. This goes to strengthen Cooper's (2009) assertion that personal commitment backed up by spirituality, education and communal support is a useful medium for combating alcoholism.

Apart from the religious beliefs and doctrines on the need for peaceful coexistence and moral virtues, research shows the different roles undertaken by various religious bodies in providing succor to people in distress situations like those in the prison, psychiatric homes, hospitals, refugee camps, internally displaced person's camps and those who are bereaved. Beyond reasonable doubt, no core adherent of any religion can be corrupt. One of the challenges bedeviling the human society is that many pretend to be adherents of a particular religion but do not imbibe the principles of the religion. Many use religion as a pretext for perpetuating evil and committing heinous crimes, especially in Africa. It is imperative to observe that African traditional religion promotes an upright lifestyle, justice and peace, and these are the needed tools for nation building, which could be harnessed in the fight against alcoholism. Religions generally teach love, respect, truth and obedience; all these promote peaceful coexistence including African Traditional Religion (Ibenwa 2014). In the words of Ajaegbu (2012), 'religion and development are seemingly inseparable'.

In our contemporary epoch, it is self-evidence that most young adults spend most of their time on social media and watching football channels, and most of the adverts on these channels are alcohol products. Therefore, to curb this menace, the enlightenment and awareness programmes should be projected on the social media platforms available and adverts on alcohol-related diseases should be aired on different sports channels and other mass media platforms. Awosusi and Adegboyega (2015) advocate that 'school administrators should place bill boards in strategic places in the school condemning the use of alcohol in the school environment'. If all these strategies mentioned here are applied in the nearest future, the rate of alcohol consumption among young adult in Africa will reduce.

Conclusion

Although many have attributed the problem of alcohol abuse in Africa to African traditional religion and culture owing to its acceptance or approval of alcohol consumption, the article submits that this existential problem is neither a product of African religious beliefs nor the traditional beliefs of the people rather it is the product of greed, a lack of self-control, peer pressure, indiscipline and a lack of moral upbringing. It goes to mean, therefore, that RDS, which serves as a driving force compelling compulsive alcohol consumption in individuals, should be treated and the alcoholic educated and enlightened on the danger and retrogressive characteristics of abuse of alcohol. As we have seen that

African traditional religion and culture had ethical norms that guide the use and consumption of alcohol; this compelled traditional Africans to drink responsibly. Alcohol and drug abuse in Africa is a contemporary problem – one borne out of the spirit of the epoch. The spirits of the epoch are fame, immorality, corruption, pride and individualism. From the Focus Group Discussion carried out, the result shows that many young adults who consume alcohol are naïve of its health implications. On this note, the article submits that the plausible remedy to this epochal problem is education and enlightenment campaign on the social and health implications of alcohol abuse. This enlightenment campaign should be performed through the mass and social media, socio-cultural groups and by incorporating it in the educational curriculum. Nevertheless, it is imperative to notice that this problem cannot be eradicated completely in as much as alcohol consumption and production are part of African religion and culture rather it can be minimised.

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Authors' contributions

E.C.E. as the lead author was responsible for the conception of the idea, data arrangements, analysis, writing of the initial draft, the literature review and most aspects of this article. E.O.J. contributed in the gathering of data as well as in writing part of the literature review for this research.

Ethical considerations

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Data availability

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