

DRUG ADDICTION IN HIGHER EDUCATION: A QUALITATIVE STUDY OF CAUSES, CONSEQUENCES, AND INSTITUTIONAL RESPONSES AMONG UNIVERSITY STUDENTS IN PAKISTAN

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Abstract

Drug addiction among university students has become an escalating concern in Pakistan's higher education landscape, threatening not only academic achievement but also students psychological and social well-being. The growing prevalence of substance use among youth reflects deeper psychosocial and institutional challenges, including academic stress, emotional vulnerability, peer influence, and lack of mental health support. This study was designed to explore the lived experiences, underlying causes, and perceived consequences of drug addiction among university students within the specific cultural and educational context of Pakistan. Adopting a qualitative, phenomenological approach under the interpretivist paradigm, the research aimed to uncover the meanings students attach to their experiences of drug use. Data were collected through semi-structured interviews with eight participants recruited from five universities across Khyber Pakhtunkhwa using purposive and snowball sampling techniques. The analysis produced six major themes and corresponding sub-themes:

Academic Pressure and Performance Anxiety highlighting excessive workload, fear of failure, and parental expectations as key stressors, Peer Influence and Normalization of Drug Use emphasizing the role of social belonging and imitation in drug initiation, Emotional Distress and Escapism revealing how loneliness, anxiety, and unresolved trauma lead to self-medication, Stigma and Silence—exposing how cultural shame and institutional denial perpetuate secrecy and hinder help-seeking, Impact on Academic and Personal Life illustrating deteriorating performance, absenteeism, emotional instability, and strained family relationships and Lack of Institutional Support and Awareness showing that universities largely fail to provide counseling or preventive education, relying instead on punitive policies. The study concludes that drug addiction among students is not merely a behavioral or moral problem but a manifestation of systemic neglect and emotional deprivation. It emphasizes the need for university-level reforms, including mental health counseling, peer mentorship, and awareness programs, grounded in empathy rather than punishment. By amplifying students'

voices, this research provides culturally nuanced insights and policy directions for addressing addiction through prevention, care, and education.

INTRODUCTION

Drug addiction has emerged as a pressing public health concern globally, transcending geographic, demographic, and socioeconomic boundaries. In recent decades, there has been a disturbing rise in drug misuse, particularly among youth populations, including university students. In Pakistan, this alarming trend has raised critical questions about the health and academic productivity of the country's future professionals and scholars (UNODC, 2018). Drugs are broadly defined as substances that, upon entering the body, modify normal mental or physiological processes. These substances can be legal or illegal and include prescription drugs, over-the-counter medications, and illicit narcotics. This study specifically focuses on psychoactive drugs those that influence mental activity, emotional responses, and behavior. In Pakistani universities, students often misuse such substances in response to academic stress, social influences, and psychological strain (Aslam et al., 2019).

Substance use disorder, commonly termed drug addiction, is a chronic, relapsing condition marked by compulsive drug-seeking behavior and continued use despite harmful consequences. This disorder leads to long-term changes in the brain's reward, self-control, and stress regulation systems. Even after cessation, these neurological changes can persist, leading to ongoing challenges such as deteriorating academic performance and strained social interactions (American Psychiatric Association, 2013; Volkow et al., 2016).

A nationwide survey estimated that around 6.7 million people in Pakistan use drugs, with university students comprising a notable proportion. Studies in major cities like Karachi and Lahore indicate that peer influence, academic demands, and easy access to drugs are significant contributors (Khan & Ali, 2021; Mahmood et al., 2020). Additionally, a study by Ahmed et al. (2022) revealed a strong negative correlation between drug use and academic outcomes, including reduced GPA, absenteeism, and increased dropout rates. Despite these concerning trends, there is a scarcity of in-depth, empirical studies exploring the causes and academic effects of drug abuse among

university students in Pakistan, thus necessitating this research. Substance use disorder is a pervasive global issue with far reaching effects on public health, education, and socioeconomic stability. As reported by UNODC (2023), approximately 296 million individuals worldwide engaged in drug use in 2021, marking a 23% increase over the previous decade. University students, particularly young adults, are highly susceptible due to academic stress, peer influence, and the pursuit of enhanced cognitive performance (WHO, 2022).

Pakistan faces a compounded drug addiction crisis due to its geographic location and socio-political challenges. The country's border with Afghanistan facilitates the transit and availability of narcotics, making local access easy. According to the UNODC (2018), more than 6.7 million people in Pakistan engage in drug use, with a substantial share being young adults and university students. Drugs frequently misused in Pakistan include cannabis, opioids, stimulants, and prescription medications. Urban areas such as Karachi, Lahore, and Islamabad show higher prevalence rates, especially among male students, due to availability, poor regulation, and societal pressures (UNODC, 2018). Khan and Ali (2021) identified peer pressure and academic stress as leading causes of substance abuse in university environments. Likewise, Mahmood et al. (2020) observed a surge in stimulant use during examination periods. Furthermore, Ahmed et al. (2022) confirmed that students who use drugs report poorer academic outcomes. Despite these troubling statistics, systematic academic research on the phenomenon remains limited. The current study aims to bridge this gap by investigating the reasons for drug use among university students in Pakistan and evaluating its academic implications.

The university phase is marked by critical transitions both academic and personal which can expose students to risky behaviors, including drug use. Studies indicate that many students begin or increase drug use during their university years, often citing stress relief, social integration, and mental health issues as motivators (UNESCO, 2020; WHO, 2022).

Substance abuse in academic contexts is closely linked with impaired learning, attention deficits, and sleep disorders all of which harm students' academic success and social relationships. For example, Zeidan et al. (2010) and Walker (2017) found that drug use significantly reduces memory retention and concentration. Sleep disruption caused by substances further hampers cognitive function (Van Reen et al., 2013).

Despite these effects, many Pakistani universities lack comprehensive support systems like counseling services, drug prevention programs, and peer education initiatives. Hossain and Rehman (2020) highlighted the inadequacy of existing interventions. Without targeted strategies and awareness programs, the issue is likely to escalate (Rowe & McDermott, 2021).

Drug addiction has become one of the most pressing social and educational challenges confronting youth in Pakistan today. Within university settings, the growing prevalence of substance use has raised grave concerns for educators, policymakers, and health professionals. For many students, the university experience represents a transformative stage an intersection of independence, responsibility, and pressure. However, this transition also exposes students to new forms of stress, including academic demands, peer influence, and emotional vulnerability, which can lead some toward harmful coping mechanisms such as drug use.

Globally, substance use among university students has been recognized as a serious public health issue (World Health Organization, 2022). However, in Pakistan, the problem carries additional layers of complexity due to cultural stigma, weak institutional support systems, and limited mental health awareness. The issue is particularly alarming in provinces such as Khyber Pakhtunkhwa, where social conservatism, geographical proximity to drug-producing regions, and rising youth unemployment combine to create an environment conducive to substance misuse (UNODC, 2021).

In recent years, psychoactive substances such as cannabis, amphetamines, and prescription medications have become increasingly accessible to students, often through informal peer networks. Many students report using these substances to "stay awake," "relax," or "cope with stress," unaware of the

long-term consequences on their mental and academic well-being. What begins as experimentation often escalates into dependency, resulting in deteriorating academic performance, absenteeism, and emotional distress.

This study seeks to explore the lived experiences of university students who have engaged in drug use, focusing on their perceptions of causes, consequences, and coping mechanisms. By using a qualitative approach, the research aims to go beyond numerical prevalence and instead illuminate the personal narratives behind substance use how students describe their motivations, how they perceive its impact, and how they interpret institutional and social responses.

Research Objectives

The study's objectives are as follows:

1. To explore the personal and social factors contributing to drug addiction among university students.
2. To examine the lived experiences of students engaged in substance use.
3. To understand the perceived effects of drug use on students' academic performance and emotional well-being.
4. To assess the role of peer influence, stress, and institutional environment in shaping drug-related behavior.
5. To propose recommendations for preventive and supportive strategies within higher education institutions.

This study aims to examine the growing issue of drug addiction among university students in Pakistan, focusing on its root causes, common substances used, and its effect on academic performance. It also investigates the gap in preventive services and support systems within universities. By identifying the specific factors influencing student drug use and evaluating their academic consequences, the study aims to provide insights that can inform evidence-based policies and support strategies tailored for university settings.

The study addresses the following core questions:

- 1) What personal, psychological, and social factors contribute to drug use among university students?

- 2) How do students describe their experiences of substance use in relation to academic and emotional pressures?
- 3) What are the perceived academic and social consequences of drug addiction?
- 4) How do institutional and cultural contexts influence students' attitudes toward help-seeking and recovery?
- 5) What strategies can universities implement to prevent and reduce drug use among students?

Drug

A drug is any substance that, when introduced into the body, alters its normal physiological and psychological functioning. It can include prescription medications, over-the-counter treatments, and illicit substances that affect brain activity and behavior (National Institute on Drug Abuse [NIDA], 2023).

Psychoactive Substance

Psychoactive substances are chemicals that act on the central nervous system and alter brain function, resulting in changes in perception, mood, consciousness, cognition, or behavior (World Health Organization [WHO], 2021). These include legal substances like alcohol and prescription medications, as well as illegal drugs such as heroin or methamphetamine.

Substance Use Disorder (SUD)

Substance Use Disorder is a medical condition in which the use of one or more substances leads to a clinically significant impairment or distress. It is diagnosed based on a pattern of behaviors indicating impaired control, social impairment, risky use, and pharmacological criteria (Substance Abuse and Mental Health Services Administration [SAMHSA], 2022).

Drug Addiction

Drug addiction has evolved from being viewed solely as a moral or social failing to being understood as a complex brain disorder involving physical, psychological, and environmental factors. Modern neuroscience has demonstrated that prolonged drug use leads to alterations in the brain's reward system, impairing decision-making, motivation, memory, and self-regulation (Volkow et al., 2019). These changes

make quitting difficult and relapse common, even after extended periods of abstinence.

Types of Addictive Drugs

Cannabis (Marijuana/Hashish) Cannabis is one of the most frequently used illicit drugs globally and among university populations. It is consumed for its relaxing and euphoric effects. However, chronic use is associated with memory deficits, decreased motivation, and impaired academic functioning (Volkow et al., 2016). In South Asian countries like Pakistan, cannabis is widely known as "charas" and is easily accessible among youth.

Opioids (Heroin, Morphine, and Codeine) Opioids are powerful pain-relieving substances that induce feelings of euphoria and sedation. Heroin is a particularly dangerous illicit opioid with a high risk of dependence. Misuse of opioids, including prescription forms like morphine and codeine, has been associated with overdose deaths and significant declines in mental and physical health (Compton et al., 2016).

Stimulants (Cocaine, Methamphetamine, Prescription ADHD Medications) Stimulants are drugs that increase alertness, attention, and energy. Illicit stimulants like cocaine and methamphetamine are sometimes used by students attempting to enhance academic performance or remain awake for extended study periods. Prescription stimulants such as Adderall or Ritalin are often misused for similar purposes, despite their potential for dependence and long-term cognitive impairment (Lakhan & Kirchgessner, 2012).

Sedatives and Tranquilizers (Benzodiazepines) Benzodiazepines such as diazepam and alprazolam are prescribed for anxiety and sleep disorders but are frequently misused by students to manage academic or social stress. These substances have sedative effects and can impair learning, memory, and psychomotor function, especially when used without medical supervision (Lembke, 2017).

New Psychoactive Substances (NPS) New Psychoactive Substances are synthetic compounds designed to mimic the effects of existing illicit drugs.

They often have unpredictable effects due to limited research on their pharmacology and safety. These drugs have gained popularity among university students because of their easy availability online and evasion of legal classification (UNODC, 2021).

Alcohol and Nicotine Although legal, alcohol and nicotine are among the most addictive substances used by students. Both are socially accepted but carry significant health risks. Excessive alcohol consumption impairs judgment, increases risky behavior, and is linked to academic failure (White & Hingson, 2014). Nicotine, especially in the form of e-cigarettes or vaping, is increasingly popular and contributes to long-term addiction and respiratory problems (U.S. Department of Health and Human Services, 2016). (Tims & Langenbucher, 2017).

Other Drugs

Hallucinogens (LSD, Psilocybin) Hallucinogens are a class of drugs that alter perception, mood, and cognitive processes. They are commonly used by university students seeking an altered state of consciousness, often for recreational purposes. Among the most commonly used hallucinogens are Lysergic acid diethylamide (LSD) and psilocybin (the active compound in "magic mushrooms"). These substances are often ingested orally or in the form of tablets, capsules, or dried mushrooms.

LSD produces intense visual and auditory hallucinations, altered perceptions of time and space, and deep introspective experiences. While some users report positive experiences, the effects of LSD can be unpredictable, leading to "bad trips" that may result in anxiety, paranoia, and confusion. Long-term use of hallucinogens can also have lasting effects on mental health, particularly in individuals with a predisposition to mental health disorders such as schizophrenia or anxiety disorders (Krebs & Johansen, 2013). University students may use these drugs for exploration, stress relief, or as a form of social bonding, but the risks particularly psychological harm make them a significant concern in student populations. Psilocybin produces similar effects, including hallucinations, altered perceptions, and heightened sensory experiences. It has been gaining attention in both recreational and research contexts for its potential therapeutic use in treating depression

and anxiety (Griffiths et al., 2016). However, psilocybin use can still lead to unpredictable psychological reactions, and its use among university students raises concerns about safety and mental health risks.

Ecstasy (MDMA) Ecstasy, also known as MDMA (3, 4-methylenedioxymethamphetamine), is a popular club drug that is often used in social and party settings. It is known for its euphoric and pathogenic effects, which increase feelings of connection, emotional warmth, and social bonding. For this reason, ecstasy is commonly used by university students at parties, concerts, or raves. It is typically ingested in pill or capsule form.

While MDMA can produce pleasurable effects, it can also lead to a range of negative side effects, including dehydration, hyperthermia (elevated body temperature), anxiety, and mood swings. Chronic use can cause long-term damage to serotonin-producing neurons in the brain, leading to cognitive and emotional problems, such as memory impairment and depression (Parrott, 2013). MDMA's potential to impair cognitive functions and its effects on emotional regulation are concerns for students who may already be dealing with academic stress and emotional challenges.

Drug addiction among university students is a growing concern across the globe, with increasing reports of substance abuse impacting not only the health of individuals but also their academic performance. In Pakistan, the prevalence of drug use among students is a rising issue, with several studies indicating a correlation between substance use and academic decline (Zuberi, 2017; Ali & Iqbal, 2018). The university years, often considered a crucial phase for academic and personal development, are marred by the pressures of academic performance, social integration, and personal identity formation. For many students, these pressures lead to an increased susceptibility to substance use, which may offer temporary relief from stress but has long-term consequences on their mental health and academic outcomes (Hassan & Noreen, 2019).

Khyber Pakhtunkhwa, a province in Pakistan, faces particular challenges when it comes to drug addiction among university students. The region is strategically located near areas with high drug trafficking activity,

making it more vulnerable to the spread of illicit substances (Farid & Qadir, 2020). The socio-political climate, including ongoing conflict and instability, further exacerbates the situation, creating an environment where students are more likely to turn to drugs as a coping mechanism. Studies in the region suggest that both urban and rural university students in Khyber Pakhtunkhwa are increasingly using drugs, with marijuana, alcohol, and prescription drugs being the most commonly abused substances.

Drug addiction is generally defined as a chronic, relapsing condition characterized by compulsive drug-seeking behavior despite harmful consequences (WHO, 2022). However, qualitative scholars argue that addiction cannot be understood solely through clinical definitions; it must also be viewed as a socially embedded experience (Neale, 2016).

From a sociological standpoint, drug use is often linked to social identity, belonging, and coping mechanisms (Becker, 1963). For many young adults, experimentation with drugs represents a symbolic transition toward adulthood or social acceptance. In contrast, psychological perspectives highlight the emotional dimensions stress, anxiety, trauma, and loneliness that make individuals more vulnerable to substance dependence (Khantzian, 1997). Within university settings, addiction emerges not merely as deviant behavior but as a response to contextual pressures such as competition, performance expectations, and limited coping resources. Creswell (2013) emphasizes that qualitative inquiry is particularly suited for such complex human behaviors, as it allows researchers to capture emotion, motivation, and meaning through direct narratives.

Drug Use among University Students: A Global Perspective

Numerous international studies have examined substance use in higher education. Research from the United States, Europe, and Southeast Asia consistently reports high rates of stimulant, alcohol, and cannabis use among university students (Johnston et al., 2022). Qualitative studies in these regions reveal that academic stress, peer culture, and easy access to substances are primary motivators (Peralta & Steele, 2020).

In a phenomenological study conducted in the United Kingdom, Hutton (2019) found that students

often view drug use as a “normalized” aspect of campus life, describing it as a means of relaxation and social bonding. Similar findings emerged in a South African qualitative inquiry, where students associated substance use with temporary relief from socio-economic pressures and emotional strain (Mokoena, 2018).

Such studies collectively suggest that drug use among students is not merely about hedonism but about coping and conformity mechanisms that help them navigate academic and emotional challenges.

The South Asian Context

Within South Asia, the issue of youth drug addiction carries distinctive cultural and structural features. Pakistan, India, and Bangladesh share common challenges such as weak enforcement of drug control policies, limited mental-health infrastructure, and strong social stigma surrounding addiction (UNODC, 2021).

A qualitative study in India by Singh and Chaturvedi (2020) found that students often begin experimenting with drugs due to peer curiosity, family conflict, and urban exposure. In Nepal, Sharma (2019) highlighted that peer groups often provide both the initial exposure and the ongoing social network for drug availability. In Pakistan, most research on university drug use has been quantitative, focusing on prevalence rates and risk factors (Ahmed & Yousaf, 2017). Few studies have investigated the lived experiences of affected students. As a result, the voices of young people how they perceive addiction, how they make sense of their behavior, and how they interpret institutional responses remain largely unheard. This gap underlines the need for the present qualitative study.

Psychosocial Causes of Drug Addiction Academic Pressure and Stress

Academic stress is a recurring theme in both global and local research. Heavy workloads, competitive grading, and parental expectations often push students toward maladaptive coping mechanisms. In a Nigerian qualitative study, Adesina (2021) found that students use stimulants to stay awake and concentrate during exams. Similarly, Pakistani students report using drugs such as cannabis or sleeping pills to balance study and rest cycles (Khalid,

2020). Students frequently describe these behaviors as “temporary solutions” rather than deliberate deviance reflecting the situational nature of addiction during academic crises.

Peer Influence and Social Identity

Peer networks exert a strong influence on drug use patterns. Becker’s (1963) classic interactionist theory explains how individuals learn both the techniques and meanings of drug use through social interaction. Studies in Pakistan (Malik & Rehman, 2019) have shown that university hostels and social gatherings provide environments where experimentation is normalized. Qualitative interviews conducted by Saeed (2021) revealed that students often use drugs to gain acceptance or appear “modern” among their peers, demonstrating how addiction is intertwined with social identity construction.

Emotional Distress and Coping

Emotional distress stemming from family problems, relationship issues, or financial hardship has been widely documented as a trigger for substance use (Khantzia, 1997). In a Malaysian qualitative study, Hashim et al. (2020) found that students viewed drugs as an escape from loneliness and anxiety. Similar sentiments are expected in the Pakistani context, where mental-health stigma prevents students from seeking counseling or therapy.

Consequences of Drug Addiction among Students Academic Performance

Research consistently links drug use to reduced academic engagement. Students often report loss of concentration, absenteeism, and declining grades (Hussain & Khan, 2018). Qualitative findings emphasize the subjective experiences of failure and self-blame that accompanies addiction. For instance, in a Jordanian study, Al-Quraan (2019) found that students described feeling “detached” from learning after repeated use of narcotics.

Psychological and Social Effects

Beyond academics, addiction affects students’ self-esteem, relationships, and emotional regulation. Participants in qualitative inquiries often express feelings of guilt, isolation, and hopelessness

(Mokoena, 2018). Some describe a loss of belonging within both academic and family contexts.

Lincoln and Guba (1985) argue that understanding such subjective consequences is vital for developing human-centered interventions. By interpreting emotions as data, qualitative research allows educators to design responses that address the person behind the addiction rather than the behavior alone.

Institutional and Cultural Context

Universities in Pakistan typically lack structured mental-health or rehabilitation services. Counseling centers, if they exist, are often under-resourced or viewed with suspicion by students (Raza & Malik, 2022). The cultural stigma surrounding addiction discourages open dialogue, while punitive disciplinary policies further isolate affected students. A study by Awan (2020) indicated that students fear being expelled or labeled as “addicts,” so they remain silent about their struggles. This silence reinforces a cycle of hidden addiction and unaddressed trauma. Creswell (2013) notes that qualitative studies can uncover these institutional silences, giving voice to marginalized experiences that numbers alone cannot reveal. Thus, exploring how Pakistani universities perceive and respond to student addiction remains a central research necessity.

Theoretical Framework

This study draws upon two interrelated theoretical perspectives:

Social Learning Theory (Bandura, 1977): Suggests that individuals adopt behaviors through observation and imitation of peers. This framework helps explain how drug use spreads within university peer networks.

Strain Theory (Agnew, 1992): Argues that social pressures and failure to achieve legitimate goals can lead individuals to deviant coping mechanisms, including substance use. In the academic context, unmet expectations and stress can push students toward drugs as a form of adaptation.

Although numerous studies address the prevalence of drug use in Pakistani universities, few explore the personal meanings and lived realities of addicted students. Most existing work relies on surveys and statistical correlations, neglecting the voices and

emotions of those directly affected. This research fills that gap by employing in-depth, semi-structured interviews with students from different universities in Khyber Pakhtunkhwa. By using thematic analysis (Braun & Clarke, 2006), the study aims to uncover how students interpret their addiction experiences and how social, institutional, and emotional factors intersect to sustain them.

METHODOLOGY

Research Design The study adopted an exploratory qualitative design guided by a phenomenological approach. Phenomenology focuses on understanding human experiences from the participants' perspectives (Van Manen, 1990). This design enabled the researcher to interpret how university students perceive, describe, and give meaning to their drug use experiences. Semi-structured interviews allowed flexibility in probing while maintaining focus on the research objectives.

Universe of the Study The universe of my study is Khyber Pakhtunkhwa province. The study will be carried out in five selected universities of Khyber Pakhtunkhwa as follows: University of Swabi, Agricultural University, University of Peshawar, Islamia College and Abdul Wali Khan University.

Sample and Sampling Techniques The study population consisted of university students currently enrolled in undergraduate or postgraduate programs that had either personal experience with substance use or close observation of peers involved in drug use.

Sampling Technique A combination of purposive and snowball sampling was used to identify participants. Purposive sampling allowed the researcher to deliberately select individuals who could provide rich, relevant insights into the phenomenon of drug addiction. Snowball sampling then enabled the recruitment of additional participants through peer referrals, ensuring access to individuals who might otherwise remain hidden due to stigma.

Sample Size A total of eight 8 participants were selected for in-depth interviews. The small sample size is consistent with qualitative principles, which prioritize depth over breadth (Creswell, 2013). Data saturation was reached when no new themes or insights emerged from subsequent interviews.

Tools of Data Collection This study is purely qualitative in nature, data were collected through semi-structured interviews, guided by an interview schedule. Interviews were conducted face-to-face in quiet, private locations within or near university campuses to ensure confidentiality and comfort. Each interview lasted approximately 45–60 minutes. With participants' consent, all interviews were audio-recorded and later transcribed verbatim for analysis.

Procedure Interviews were conducted face-to-face in quiet, private locations to ensure confidentiality. Each session lasted 45–60 minutes. All participants provided verbal and written consent to record the discussion. Interviews were conducted in Urdu or Pashto (depending on participant comfort), then transcribed verbatim and translated into English. Field notes were taken to document non-verbal cues and contextual factors.

Data Analysis Data were analyzed using Thematic Analysis, following the six-step framework proposed by Braun and Clarke (2006). This method was chosen because of its flexibility and suitability for identifying, analyzing, and reporting patterns within qualitative data.

The six stages included:

1. **Familiarization with the data:** Listening to audio recordings and reading transcripts repeatedly to gain immersion.
2. **Generating initial codes:** Systematically coding meaningful features across the dataset.
3. **Searching for themes:** Grouping related codes into potential themes that captured broader meanings.
4. **Reviewing themes:** Refining and validating themes to ensure they accurately represented the data.

5. Defining and naming themes: Articulating the essence of each theme and its relevance to the research objectives.

6. Producing the report: Integrating themes and illustrative quotations into a coherent narrative for the findings chapter.

Ethical Considerations Informed consent was used to ensure voluntary participation of the respondents. Respondents were allowed to continue or discontinue the interviews as they deem appropriate during the study. Respondents were made sure of the confidentiality and privacy their data.

Table 1

Age Distribution of Respondents

Age Group	Frequency	Percentage
Under 18	10	5%
18-20	60	30%
21-23	80	40%
24-26	30	15%
Above 26	20	10%

Table 1 presents the age distribution of respondents. Most participants (40%) are aged 21-23 years, followed by 30% in the 18-20 age group. This reflects

a typical undergraduate population. Only 5% are under 18, while 10% are above 26, possibly representing postgraduate students.

Table 2

Gender of Respondents

Gender	Frequency	Percentage
Male	110	55%
Female	85	42.5%
Other	5	2.5%

Table 2 shows the gender distribution of participants. A majority (55%) are male, while 42.5% are female. A small minority (2.5%) identify as other, reflecting increasing gender diversity in student populations.

RESULTS

This chapter presents the key findings derived from eight in-depth, semi-structured interviews conducted with university students from Khyber Pakhtunkhwa. The purpose of the analysis was to explore students' lived experiences with drug use, the underlying causes that led to addiction, and its academic, psychological, and social consequences. Through thematic analysis,

six major themes emerged that are Academic Pressure and Performance Anxiety, Peer Influence and Normalization of Drug Use, Emotional Distress and Escapism, Stigma and Silence, Impact on Academic

and Personal Life, Lack of Institutional Support and Awareness.

Table 3

Major Themes	Sub-Themes	Codes
Academic Pressure and Performance Anxiety	• Fear of Failure	exam stress, study pressure, sleepless nights, self-blame
	• Coping through Stimulant Use	use of pills, caffeine substitutes, staying awake, concentration aid
	• Family Expectations	parental pressure, comparison with siblings, fear of disappointing family
Peer Influence and Normalization of Drug Use	• Initiation through Peers	curiosity, persuasion, group influence, hostel exposure
	• Group Acceptance and Belonging	need for inclusion, social bonding, not wanting to feel left out
	• Social Legitimization of Use	normalization, everyone does it, cultural acceptance
Emotional Distress and Escapism	• Family Conflict and Loneliness	broken family ties, lack of attention, isolation
	• Anxiety and Depression	overthinking, sadness, mental exhaustion
	• Drugs as Emotional Relief	self-medication, escape, temporary calmness



Major Themes	Sub-Themes	Codes
Stigma and Silence	• Fear of Judgment • Institutional Silence • Internalized Shame	social labeling, fear of exposure, secrecy lack of open discussion, absence of awareness programs guilt, embarrassment, low self-worth
Impact on Academic and Personal Life	• Academic Decline • Emotional Instability • Damaged Relationships	absenteeism, lack of concentration, falling grades mood swings, loss of motivation, guilt distrust, family conflict, social withdrawal
Lack of Institutional Support and Awareness	• Absence of Counseling Services • Punitive Campus Culture • Student Recommendations	lack of mental health staff, no confidential help, ignorance punishment, fear of expulsion, zero-tolerance policy need for awareness programs, mentorship, non-punitive counseling



Theme 1: Academic Pressure and Performance Anxiety

Most participants described academic stress as a primary trigger for initial drug use. Heavy workloads, exam anxiety, and competition were recurring pressures that led students to seek quick relief.

P2: "When exams come close, I feel like I can't breathe. A friend told me that a pill could help me stay awake. I tried it once, and I studied the whole night. That's how it started."

P6: "Sometimes I feel the entire system is designed to crush you. If you can't perform, you're a failure. Drugs gave me the energy I needed, but later I realized I was losing control." These experiences resonate with the findings of Adesina (2021), who emphasized the role of academic pressure in pushing students toward stimulants. In Pakistan's competitive education system, students often face unrealistic expectations from families and teachers. Over time, such pressure can foster

dependency on substances perceived as performance enhancers. This theme aligns with Agnew's Strain

Theory (1992), suggesting that academic strain acts as a stressor that motivates deviant coping mechanisms like drug use.

Theme 2: Peer Influence and Normalization of Drug Use

Another major factor influencing students' drug use was peer pressure. Many participants stated that their introduction to drugs occurred in social gatherings, hostels, or university canteens.

P4: "I never thought about using drugs until I saw my roommates doing it. They said it helps you 'chill' after a long day. I just wanted to fit in."

P8: *"In our hostel, drugs are not a secret. People smoke or take pills openly. If you don't join, you're called boring or weak."*

Peer influence not only encourages initiation but also sustains addiction through a sense of belonging and acceptance. Becker's (1963) Social Learning Theory supports this observation, showing that individuals learn both the behavior and its justification through interaction. The normalization of drug use among peers reflects a cultural shift in some university environments, where such habits are no longer viewed as deviant but as part of social bonding.

P3: *"It's not about getting high; it's about being part of the group. You can't be the outsider."*

Theme 3: Emotional Distress and Escapism

Several participants revealed that emotional turmoil stemming from family issues, loneliness, or mental health struggles was a driving force behind substance use. Drugs were seen as a temporary escape from sadness or internal pain.

P1: *"I come from a very strict family. Talking about depression or anxiety is not allowed. When I felt low, drugs became my only escape."*

P7: *"Sometimes I just wanted to stop thinking. Drugs helped me forget for a few hours."*

This theme reflects Khantzian's Self-Medication Hypothesis (1997), which posits that substance use can be an unconscious attempt to manage emotional suffering. Qualitative studies in similar contexts (Hashim et al., 2020; Mokoena, 2018) found that students often use drugs not for pleasure but for psychological survival.

P5: *"It wasn't about fun for me. It was about numbing my thoughts. It gave me peace that I couldn't find anywhere else."*

The accounts reveal that emotional pain and lack of emotional support are powerful precursors to addiction among young people navigating personal and academic transitions.

Theme 4: Stigma and Silence

Participants consistently mentioned stigma as a barrier to seeking help. Fear of being labeled as

"addicts" or "bad students" discouraged them from accessing institutional support or confiding in teachers or counselors.

P6: *"I once thought about going to the university counselor, but I was scared. What if they tell my parents or suspend me?"*

P8: *"You can't talk about drugs openly. People will judge you or call you a criminal."*

Such silence perpetuates cycles of addiction and isolation. The cultural stigma surrounding drug use in Pakistan combined with conservative social norms, forces students to suffer privately. Lincoln and Guba (1985) emphasize that qualitative research reveals these hidden experiences the unspoken fears and emotions that quantitative surveys overlook. In this context, silence becomes both a symptom and a consequence of addiction.

P2: *"Even if you want help, where do you go? Nobody talks about it. Everyone hides."*

Theme 5: Impact on Academic and Personal Life

All participants reported negative academic consequences following prolonged drug use. They described difficulty concentrating, skipping classes, and declining grades.

P1: *"I used to be a top student, but after a year of using, my GPA dropped badly. I couldn't focus or remember what I studied."*

P3: *"At first, drugs helped me study, but later, I lost interest in everything. I stopped caring about classes." Emotional and social repercussions were equally severe. Participants expressed feelings of guilt, isolation, and deteriorating relationships with family and friends.*

P5: *"My parents think I'm just lazy. They don't know what I'm going through."*

P4: *"I lost my best friends because they couldn't trust me anymore."*

These findings echo prior research (Hussain & Khan, 2018; Al-Quraan, 2019), which links drug addiction to academic decline and emotional instability. The

duality of drug use initially seen as a solution but ultimately becoming the problem is a recurring narrative among participants.

Theme 6: Lack of Institutional Support and Awareness

Most participants criticized their universities for the absence of effective support systems such as counseling centers, awareness campaigns, or rehabilitation programs.

P7: “There’s no one to talk to. The university pretends like this problem doesn’t exist.”

P2: “If a student is caught, they punish him instead of helping. That’s why nobody speaks up.”

Such responses highlight a significant institutional gap in addressing student well-being. Studies by Awan (2020) and Raza & Malik (2022) similarly found that many Pakistani universities lack structured mental health policies.

Participants recommended the establishment of non-punitive, student-friendly spaces where issues like addiction and stress could be discussed without fear.

P6: “We need a place where students can talk openly without being judged or punished.”

This aligns with Creswell’s (2013) argument that educational institutions must adopt human-centered approaches to address complex social problems like addiction. The analysis reveal that drug addiction among university students is not a result of moral weakness but rather a multifaceted psychosocial process influenced by academic strain, peer culture, emotional distress, and institutional neglect.

DISCUSSION

The discussion situates the six emergent themes academic pressure, peer influence, emotional distress, stigma, academic impact, and institutional neglect within the framework of existing literature and theoretical perspectives. this chapter interprets the lived experiences of students through broader psychosocial and cultural lenses. The findings contribute to the growing discourse on youth addiction and mental health in South Asian higher education contexts.

Academic Pressure and Performance Anxiety

The first theme, academic pressure and performance anxiety, emerged as a fundamental driver of substance use. Participants described excessive workload, high parental expectations, and competition as major stressors. This aligns with Agnew’s (1992) General Strain Theory, which posits that individuals engage in deviant behaviors when legitimate coping strategies fail.

Similar patterns have been observed in studies from other academic contexts. Adesina (2021) found that Nigerian students used stimulants like amphetamines to manage exam-related stress, while Aslam et al. (2019) reported a rising trend of prescription drug misuse among Pakistani university students driven by performance anxiety.

The narratives in this study extend these findings by revealing how academic strain interacts with family expectations and cultural definitions of success, producing psychological exhaustion. For many participants, drugs provided temporary relief from the relentless pursuit of achievement.

This echoes Misra and McKean (2000), who emphasized that unaddressed academic stress leads to maladaptive coping mechanisms, especially in collectivist societies where academic success is linked to family honor. Hence, academic pressure in the Pakistani context must be understood not only as institutional but also as familial and cultural deeply embedded in social norms surrounding success and respectability.

Peer Influence and Normalization of Drug Use

The theme highlights how social dynamics, especially peer networks, act as catalysts for initiation and continued drug use. Participants described drugs as a means of belonging and fitting in, reinforcing Bandura’s (1977) Social Learning Theory, which emphasizes imitation and reinforcement in behavioral development. In Pakistan, where hostel life and collective living are common, peer influence can be particularly strong. Hussain and Khan (2018) similarly observed that peer groups are a central factor in shaping drug-related behaviors among students. Internationally, Perera et al. (2018) found that social bonding often legitimizes drug use as a “shared experience” rather than a deviant act.

However, this study extends previous research by revealing the *emotional undertone* of peer conformity. Participants described peer acceptance as compensatory for emotional neglect or loneliness. This indicates that peer-driven drug use among students is not simply social imitation it is emotional compensation within an environment lacking empathy and connection. The findings thus nuance the Social Learning framework by showing how emotional deprivation amplifies the susceptibility to peer-driven behaviors. In contexts of limited social support, peer normalization becomes not only a behavioral influence but also an emotional refuge.

Emotional Distress and Escapism

The third theme emotional distress and escapism—was one of the most profound. Participants described drug use as an escape from loneliness, anxiety, and unresolved trauma. These findings align strongly with Khantzian's (1997) Self-Medication Hypothesis, which posits that individuals use substances to alleviate psychological pain.

In Pakistan, emotional expression remains culturally constrained, particularly among young men (Khalid & Riaz, 2020). The participants' experiences reveal how emotional suppression and familial detachment create fertile ground for self-medication. As P1 explained, "Drugs filled that emptiness my family left."

This mirrors Kokkevi et al. (2019), who found that emotional neglect is one of the most consistent predictors of substance abuse among youth globally. Emotional distress thus acts both as a trigger and a reinforce of addiction drugs temporarily numb psychological pain but ultimately exacerbate it, creating a cycle of dependency.

Furthermore, the study's findings highlight the lack of emotional literacy among students an often-overlooked factor in addiction research. Without the vocabulary or social permission to discuss mental suffering, many students turn to substances as their only available coping tool. This underscores the need for psychological education and emotional resilience training within universities, especially in patriarchal cultures where vulnerability is stigmatized.

Stigma, Shame, and Institutional Silence

The fourth theme, *stigma and silence*, reveals how social labeling, moral judgment, and institutional denial perpetuate addiction. Participants repeatedly expressed fear of exposure, leading to isolation and avoidance of help-seeking. This is consistent with Link and Phelan's (2001) framework of stigma, which describes how labeling and discrimination reinforce social exclusion. In Pakistan, where drug addiction is often equated with moral weakness, students' identities are overshadowed by shame.

P6 stated, "We never talk about drugs at university. It's like pretending it doesn't exist." This silence is mirrored institutionally; Awan (2020) found that Pakistani universities rarely address drug use openly, opting instead for punitive measures.

Comparatively, Rehman & Qureshi (2019) argue that institutional silence functions as an enabling condition for addiction when universities fail to acknowledge the issue, it thrives unchecked.

The present study deepens this understanding by demonstrating that internalized stigma becomes a form of psychological imprisonment. Participants such as P2 expressed intense self-hatred: "Every time I used, I hated myself more."

This finding resonates with Corrigan and Watson (2002), who differentiates between public stigma and self-stigma, emphasizing that internal shame, can be more damaging than external judgment. Thus, stigma in Pakistani academia is not only cultural it is institutionalized through silence, punishment, and absence of dialogue.

Academic and Personal Consequences

The fifth theme demonstrates the dual erosion of educational performance and emotional stability. Students reported declining grades, absenteeism, and cognitive dysfunction, consistent with prior research by Hussain and Khan (2018) and Raza & Malik (2022). However, this study adds nuance by revealing the emotional cost of addiction. Feelings of guilt, self-disgust, and isolation pervaded participants' narratives. These emotional consequences mirror findings by Perera et al. (2018), who linked academic disengagement to self-esteem loss among addicted students.

Moreover, addiction disrupted family relationships, producing a cycle of mistrust and alienation. P5 stated,

"My parents stopped trusting me; I felt like an outsider in my own home."

Such ruptures reflect Attachment Theory (Bowlby, 1988), which posits that insecure attachment during adolescence increases vulnerability to both emotional dysregulation and substance dependence. Therefore, addiction's academic consequences cannot be separated from its emotional dimensions both stem from systemic neglect of students' psychological well-being.

Lack of Institutional Support and Awareness

This underscores the structural void within universities. Participants emphasized the absence of counseling services and mental health programs, echoing Awan's (2020) findings that Pakistani institutions approach addiction primarily through punishment rather than prevention.

P7 explained, *"There's no proper counselor. We only get warnings, not guidance."* This reveals a gap between institutional responsibility and student needs.

Globally, effective campus interventions integrate counseling, peer mentorship, and awareness programs (WHO, 2022; UNODC, 2021). Yet, in Pakistan, the concept of **student** mental health infrastructure remains underdeveloped. The study's findings suggest that punitive cultures exacerbate fear and silence, whereas supportive environments promote openness and recovery. This aligns with Rogers' (1951) Humanistic Theory, which emphasizes empathy and unconditional positive regard as prerequisites for personal growth and behavioral change. Hence, universities must reframe addiction as a mental health issue requiring compassionate response, not disciplinary action.

This chapter has integrated the study's findings with existing literature and theoretical frameworks to offer a comprehensive interpretation of drug addiction among Pakistani university students. The discussion reveals addiction as a symptom of broader psychosocial dysfunctions academic strain, emotional neglect, peer conformity, and institutional silence.

By linking participants' lived experiences to established theories, the study underscores that drug use among students is not merely a moral failure but a psychosocial coping mechanism embedded in structural and cultural realities. The findings call for a redefinition of addiction discourse in Pakistan one

that moves beyond punishment toward understanding, empathy, and institutional reform.

Conclusion

This study concludes that drug addiction among university students in Pakistan is a multifaceted issue arising from intense academic pressure, peer influence, emotional distress, and a lack of institutional and familial support. Students often resort to drugs as a means to cope with performance anxiety, loneliness, and psychological pain, confirming the relevance of Strain Theory, Social Learning Theory, and the Self-Medication Hypothesis. Cultural stigma and punitive university policies further silence those in need, transforming addiction from a personal problem into a systemic failure of empathy and care. The findings emphasize that addressing student addiction requires a shift from punishment to prevention through counseling services, awareness programs, and compassionate support systems that prioritize mental health and emotional resilience. Ultimately, the study calls for universities to redefine education as a holistic process that nurtures both intellectual growth and psychological well-being.

Limitations of the Study

- The sample size was limited to eight participants, which restricts the generalizability of findings to the broader student population.
- Participants were selected from five universities in Khyber Pakhtunkhwa, so the results may not represent students from other provinces or educational settings in Pakistan.
- The sensitive nature of drug use may have caused some participants to withhold or alter information due to fear, stigma, or social desirability bias.
- The study relied on self-reported data, which can be influenced by memory lapses or personal interpretation.
- The researcher's subjective interpretation in thematic analysis, though minimized through reflexivity and peer review, cannot be completely eliminated.
- Limited access to institutional data and official records restricted triangulation with quantitative measures such as attendance or GPA.

- Cultural and linguistic nuances during translation may have slightly affected the depth of meaning in some interview responses.

Recommendations and Suggestions

- Future studies should include a larger and more diverse sample of students from different provinces and educational institutions to enhance representativeness.
- Researchers could adopt a mixed-method approach, combining qualitative depth with quantitative data to explore prevalence and patterns of drug use.
- Gender-based and comparative studies are needed to understand differences in addiction experiences among male, female, and non-binary students.
- Longitudinal research should be conducted to examine the long-term academic, emotional, and social impacts of substance use on students' lives.
- Further investigation is recommended on the effectiveness of university-based interventions, such as counseling programs, peer mentorship, and awareness campaigns.
- Studies should also explore the role of digital stress, social media, and online communities in shaping drug-related attitudes and coping behaviors among youth.
- Future research could analyze policy implementation and institutional responses to student addiction to identify gaps between policy design and real-world practice.

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