



# **An Assessment of the Negative Impacts of Drug Abuse on Student's Academic Performance in Tertiary Institutions in Adamawa State**

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## **Abstract**

Drug Abuse and its negative consequences has been a major source of worry for the family, authorities at all levels and the society at large. This study examined the causes of drug abuse, drugs that are commonly abused, how students have access to drugs, the relationship between drug abuse and academic performance and ascertained the age group that mostly abuse drugs. The study covered eleven tertiary institutions in Adamawa state including Federal, State-owned and Private institutions through the use of questionnaire, interviews and Focus Group Discussions. The data collected was from both primary and secondary sources, and was analyzed through the use of frequency distribution tables and simple percentages. The result of the study revealed that there is a relationship between drug abuse and poor academic performance. Recommendations were made so that those concerned can take appropriate measures to mitigate or halt drug abuses on campuses in Adamawa state.

## **Keywords:**

Drug, Abuse, Medical Personnel, Prescription, Student, Academic Performance.

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## 1.0 INTRODUCTION

The primary objective for enrolling into an academic institution is to acquire knowledge so as to be proficient in a certain discipline. However, other intervening factors could truncate such fascinating ambition. Drug abuse is one of such factors that could abort a once beautifully conceived academic goal. West and Graham (2005) found out that students, as a subset of the youth population, consume large quantities of alcohol, tobacco and other drugs.

Once there is abuse of drugs, devastating consequences naturally follows ranging from physical, socially, psychologically, emotionally, e.t.c. Yahaya (2019) describes the impact of drug abuse as resulting in significant impairment or distress. It therefore becomes necessary to critically observe that if a student becomes physically, socially, psychologically or emotionally imbalanced and suffer some degree of impairment as a result of drug abuse, pursuit of academic excellence remains a mirage. It is again noted by H. Mamman and A. T. Othman (2014) that in secondary schools and most Nigerian universities, the activities of secret cults are known to have been source of threat to lives and property, and most of these cultists are usually under the influence of drugs; it is equally unfortunate to note that the increase of drug abuse globally has brought problems such as increase in violence and crimes, increase in Hepatitis B and C virus, increase in HIV/AIDS diseases, collapse of the veins and collapse in the social structure. (UNODC, 2007; Oshodi, Aina, & Onajole, 2010).

It is in light of the above that this study focuses on the effects of drug abuse among students of tertiary institutions in Adamawa state, with a view to unravelling the negative impacts and suggest how drug abuse could be reduced to the barest minimum or eradicate it completely among the students.

### 1.1 Statement of the Problem

Drug abuse is a prevailing social and medical challenge in our society with consequences that are quite devastating. It is disheartening especially when the abuse is prevalent among students who are primarily meant to be in school to set the basic building blocks for their career and future in general. M. I. Akanbi et. al (2015) opined that the alarming evidence in the prevalence of drug abuse, the effects and consequences of substance abuse among students has called for concern and challenge to all helping professions to mount strategies of equipping youths with skills of living devoid of substance abuse. The Nigerian National Drug Law Enforcement Agency (NDLEA) has stated that substance abuse is a major problem in schools, colleges and universities in Nigeria (NDLEA, 2013). If a statutory Agency like the NDLEA can emphatically affirm that drug abuse is a major problem in schools, then it calls for serious attention. Due to lack of awareness and poor education system, students abuse drugs leading to unwanted sexual abuse, property damages, violence and crime, school dropout and addiction, low academic performance, and other attendant consequences of dropping out of school. If these and many more are the consequences of drug abuse; how can drug abuse be mitigated or halted in order to avert these degrading effects? This is what the study intends to consider and proffer solutions to.

## **1.2 Objectives of the Study**

The general objective of this study is to assess the negative impacts of drug abuse on students' academic performance in tertiary institutions in Adamawa state. The specific objectives include the following:

1. To identify the causes of drug abuse among students in tertiary institutions in Adamawa state.
2. To identify commonly abused drugs among the students.
3. To identify how students access these drugs
4. To identify the relationship between drug abuse and poor academic performance
5. To find out the dominant age bracket of youths who abuse drugs.
6. To find out whether students were exposed to drug abuse before enrolling as students or until they became students.

### **1.2.1 Research Questions**

1. What are the causes of drug abuse among students in tertiary institutions in Adamawa state?
2. What are the commonly abused drugs among these students?
3. How do students access these drugs?
4. What are the relationship between drug abuse and poor academic performance?
5. What are the dominant age bracket of the youths that abuse drugs?
6. Were the students exposed to drug abuse before they were enrolled to school or until they were enrolled as students?

## **1.3 Significance of the Study**

The study will help expose attitudes and actions that people thought were not drug abuse. It will enlighten the general public on the need to control the sale and use of drugs. It will create awareness on the effects of drug abuse.

The findings will help government and school authorities in particular to know the level of drug abuses in their institutions, its consequences and measures to be taken to mitigate it or eradicate it completely.

## **1.4 Scope and Limitation of the Study**

The scope of the study is the higher institutions of learning in Adamawa State which include:

### **A. Federal Institutions:**

- i. Modibbo Adama University, Yola
- ii. Federal College of Education, Yola
- iii. The Federal Polytechnic, Mubi

### **B. State Institutions:**

- i. Adamawa State University, Mubi
- ii. Adamawa State Polytechnic, Yola
- iii. Adamawa State College of Agriculture, Ganye
- iv. Adamawa State College of Health Technology, Mubi
- v. Adamawa State College of Nursing and Midwifery, Yola
- vi. Adamawa State College of Education, Hong
- vii. Adamawa State College for Legal Studies, Yola.

### **C. Private Institutions:**

- i. American University of Nigeria, Yola
- ii. Sa'adatu College of Nursing and Midwifing, Mubi.

Of course, the researcher will not be able to administer questionnaires to all students' population in these institutions or administer interviews. Therefore, sampling of the students will be resorted to. This will help in achieving the result within the designated time for the studies.

## **2.0 LITERATURE REVIEW**

A brief review of themes and sub themes in the area of drug abuse related subject will be considered. This will serve as a guide for better comprehension of the subject matter.

### **What is Drug Abuse?**

According to the World Health Organization (WHO), a drug is a substance that can change how a living organism works. Food is usually not seen as a drug, even though some foods may have such properties. Most of the time drugs are taken to treat a disease, or other

medical condition. An example for such drugs may be Aspirin or Paracetamol. A drug is used for reasons such as curing or alleviating pain and diagnosing ill-health and is seen as a common process in many communities (Okafor, 2020). Again, drug is a substance that could bring about a change in the biological function through its chemical actions (Okoye 2001). It is also considered as a substance that modifies perceptions, cognition, mood, behavior and general body functions (Balogun, 2006:8). However, if such drugs are taken without prescription from qualified medical personnel, or an over-dose is taken, it becomes drug abuse. In this sense, drug is a chemical modifier of the living tissues that could bring about physiological, sociological and behavioural changes (Nnachi, 2007; Okoye, 2001). National Cancer Institute defines drug abuse as the use of illegal drugs or the use of prescription or over-the-counter drugs for purposes other than those for which they are meant to be used, or in excessive amounts. Drug abuse may lead to social, physical, emotional, and job-related problems (<https://www.cancer.gov/publications/dictionaries/cancer-terms/def/drug-abuse>). All drugs can be abused to the extent that it turns into addiction when the drug user is unable to stop the use of drugs despite the harmful effects on users' physical and emotional feelings (Yahaya, 2019). It is therefore common to hear some individuals say I cannot do without marijuana, Indian hemp or even medically approved drugs like benyline, tramadol, etc.

### **Example of Drugs Usually Abused**

MedicineNet clearly observed that individuals may abuse almost any substance whose ingestion can result in a euphoric ("high") feeling. While many are aware of the abuse of legal substances like [alcohol](#) or illegal drugs like marijuana (in most states) and [cocaine](#), less well-known is the fact that inhalants like household cleaners and [over-the-counter](#) medications like [cold](#) medicines are some of the most commonly abused substances. The following are many of the drugs and types of drugs that people commonly abuse and/or result in dependence:

**Alcohol:** Although legal, alcohol is a toxic substance, especially for a developing fetus when a mother consumes this drug during [pregnancy](#). One of the most common addictions, [alcoholism](#) can have devastating effects on the alcoholic individual's physical well-being, as well as his or her ability to function interpersonally and at work.

**Amphetamines:** This group of drugs comes in many forms, from prescription medications like [methylphenidate](#) (for example, [Ritalin](#), [Concerta](#), [Focalin](#)) and [dextroamphetamine](#) and amphetamine ([Adderall](#)) to illegally manufactured drugs like methamphetamine ("crystal meth"). Overdose of any of these substances can result in [seizure](#) and death.

**Anabolic steroids:** A group of substances that is most often abused by bodybuilders and other athletes, this group of drugs can lead to devastating emotional symptoms like aggression and [paranoia](#), as well as severe long-term physical effects like [infertility](#) and organ failure.

**Caffeine:** While many people consume coffee, tea, and soda, when consumed in excess, this substance can be habit-forming and produce [palpitations](#), [insomnia](#), [tremors](#), irritability, and significant [anxiety](#).

**Cannabis:** More usually called marijuana, the scientific name for cannabis is tetrahydrocannabinol (THC). Marijuana is the most commonly used illicit drug, with nearly 14 million people 12 years or older reporting having used this drug in the past year. In addition to the negative effects the drug itself can produce (for example, [infertility](#), difficulties with sexual performance, paranoia, lack of motivation), the fact that it is commonly mixed (cut) with other substances so drug dealers can make more money selling the diluted substance or expose the user to more addictive drugs exposes the marijuana user to the dangers associated with those added substances. People commonly cut marijuana with ingredients that include baby powder, oregano, embalming fluid, phencyclidine (PCP), opiates, and cocaine.

**Cathinones ([bath salts](#)):** Chemically unrelated to bath salts that people use to bathe, cathinones are chemically similar to stimulant drugs, like amphetamines, cocaine, and Ecstasy (MDMA). In addition to bath salts, other street names for cathinones include "plant food," "jewelry cleaner," or "phone screen cleaner."

**Cocaine:** A drug that tends to stimulate the nervous system, people can snort cocaine in powder form, smoke it when in the form of rocks ("[crack](#)" cocaine), or inject it when made into a liquid.

**Ecstasy:** Also called MDMA to denote its chemical composition (methylenedioxymethamphetamine), this drug tends to create a sense of [euphoria](#) and an expansive love or desire to nurture others. In overdose, it can increase body temperature to the point of causing death.

**Hallucinogens:** Examples include LSD and mescaline, as well as so-called naturally occurring hallucinogens like certain mushrooms. These drugs can be dangerous in their ability to alter the perceptions of the user. For example, a person who is intoxicated ("high" on) with a [hallucinogen](#) may perceive danger where there is none and to think that situations that are truly dangerous are not. Those misperceptions can result in dangerous behaviors (like jumping out of a window because the person thinks they have wings and can fly).

**Inhalants:** One of the most commonly abused group of substances due to its easy accessibility, inhalants are usually in household cleaners, like ammonia, bleach, and other substances that emit fumes. [Brain damage](#), to the point of death, can result from using an [inhalant](#) even just once or over the course of time, depending on the individual.

**Nicotine:** The addictive substance found in cigarettes; nicotine is actually one of the most addictive substances that exists. In fact, people often compare nicotine addiction to the intense addictiveness associated with opiates like [heroin](#).

**Opiates:** People also call this group narcotics or opioids and includes drugs like heroin, [codeine](#), [hydrocodone](#), morphine, [methadone](#), drugs like heroin, [codeine](#), [hydrocodone](#), morphine, [methadone](#), [Vicodin](#), [OxyContin](#), [Percocet](#), and Percodan. This group of substances sharply decrease the functioning of the nervous system. The lethality of opioids is often the result of the abuser having to use increasingly higher amounts to achieve the same level of intoxication, ultimately to the point that the dose needed to get high is the same as the dose that is lethal by overdose for that individual by halting the person's [breathing](#) (respiratory arrest).

**Phencyclidine:** Commonly called PCP, this drug can cause the user to feel highly suspicious, become very aggressive, and to have an exceptional amount of physical strength. This can make the person quite dangerous to others.

**Sedative, hypnotic, or antianxiety drugs:** The second most commonly used group of illicit drugs, these substances quiet or depress the nervous system. They can therefore cause death by stopping the breathing (respiratory arrest) of the individual who either uses these drugs in overdose or who mixes one or more of these drugs with another nervous system depressant (like alcohol, another sedative drug, or an opiate). The Nigerian National Agency for Food and Drug Administration (NAFDAC, 2000), summarized the following drugs that were used and misused in Nigeria. They are stimulants, hallucinogens, sedatives, miscellaneous and tranquilizers.

a. Stimulants: These are substances that act and stimulate the central nervous system directly. The users of these substances at the initial stage experience pleasant effects such as energy increases. The major source of these comes from caffeine substances.

b. Hallucinogens: These are drugs that alter the sensory processing unit in the brain. They produce distorted perception, feelings of anxiety and euphoria, sadness and inner joy. They normally come from marijuana, LSD, etc.

c. Narcotics: These drugs relieve pain, induces sleep and are addictive. They are found in heroin, codeine, opium, etc. d. Sedatives: These drugs are among the most widely used and abused because of the belief that they relieve stress and anxiety. Some of them induce sleep, ease tension, cause relaxation or help users to forget their problems. They are sourced from valium, alcohol, promethazine, and chloroform.

e. Miscellaneous: This is a group of volatile solvents or inhalants that provide euphoria, emotional disinhibiting and ever-lasting distortion of thought to the user. The main sources are glues, spot removers, tube repair, perfumes, chemicals, etc.

f. Tranquilizers: Tranquilizers are believed to produce calmness without bringing drowsiness. They are chiefly derived from Librium, Valium among others.

## **Reasons for Drug Abuse – a theoretical approach**

Many reasons may be responsible for people engaging in drug abuse, Eze and Omeje (1999) cited in Oluremi, (2012) outlined some theories that explained why some people resort to and most times depend on drugs. These theories include the following:

1. **Socio-cultural Theory of Drug Abuse:** This theory maintained that drug abuse is determined by socio-cultural values of the people. For example, certain cultures permit the consumption of alcohol and marijuana, while other cultures do not. Among the tribes in Nigeria for example, Edo, Ijaw, Igbo, Ibibio, Urhobo, Itsekiri and Yoruba, alcohol is used in cultural activities. While in the northern part of Nigeria no form of drug is allowed in any festivity.
2. **Personality Theory of Drug Abuse:** The major emphasis of this theory is that there are certain qualities of characteristics in the individuals that abuse drugs. Such personality characteristics are in ability to delay satisfaction, low tolerance for frustration, poor coping ability and low self-esteem, poor impulse control and high emotional dependence on other people. People with these personality characteristics find it difficult to abstain from drug abuse.
3. **Biological Theory of Drug Abuse:** The theory maintains that drug abuse is determined by the individual's biological or genetic factors which make them vulnerable to drug addiction.
4. **Learning Theory of Drug Abuse:** The theory maintains that usage or dependence of drugs occurs as a result of learning. The learning could be by the means of instrumental learning, conditional learning, or social learning.

### **Social Learning Theory**

This theory simply unveils the impact of peoples' behavior on others. It stresses the fact that behaviour is learnt and not necessarily innate. By observing, imitating others within a particular context, much impact is left on the protege. This process of observing or imitation or modeling results in learning; and of course, learning as put by Weinstein and Mayer (1986) is 'the relatively permanent change in a person's knowledge or behavior due to experience' (P. 1040). Meaning therefore, as people engage in their day to day life, their behaviors one altered due to consistent observation or imitation from others. R. T. Nabavi and P.5. M. S Bijande (2011) rightly Opined that by observing the behavior of others, people develop similar behavior. While Bandura himself rightly posited that imitation involves the actual reproduction of observed motor activities (Bandur 1977).

Drawing insight from this theory, it is clear that individuals can indulge in drug abuse as a result of constant interaction with others. Such interaction can pave way for observation, imitation or modeling thereby resulting in an altered behavior.



### **Negative Impacts of Drug Abuse on Students Academic Performance**

The negative impacts of drug abuse on students' academic performance are enormous. It was noted earlier that drug alters the body chemistry and the mind. Students under the influence of drugs may completely lose focus of what took them to school. This is confirmed by McCrystal, Higgins and Percy (2007) that for many adolescents and youths, drug abuse has now become a part of their lives and perhaps may have now contributed to their academic failure. Ojikutu (2010), noted that the consequence of chewing kola nut and taking bland coffee and other substances that enhance one to stay awake at night could lead to addiction and substance abuse which may result in negative health implications and adversely affect performance in examination contrary to the expectation of the students. Furthermore, Dankano et. al. (2017) found that these abused drugs and other substances, affects students academically, psychologically and socially, at times they are expelled from school and they turn up to be delinquents and join street life. Ojikutu (2010) again gave a variety of effects of drug abuse ranging from educational, social, economic, psychological, cultural, physical and moral health consequences that may lead to low academic performance, poverty, disability, maladjustment or death of the abusers. He said that its use aid crime rate, cultism, mental illness, low self-esteem and self-respect, injuries to one's health, becoming a social outcast, bringing shame to their kin and low academic performance and in some instances complete withdrawal from school.

### **3.0 METHODOLOGY**

The research design adopted for this study is the survey method particularly the use of questionnaire. This had helped in eliciting the appropriate responses since the questionnaire conceals the identity of the respondents unlike interviews and discussions. However, Focus Group Discussions (FGDs) and Key Interviews were also employed and engaged individuals and group of students, parents and other stake holders in the higher institutions like lecturers and administrators who would have been observing the effects of drug abuse on students since it is not something that is hidden. All the above mentioned sources are primary sources. The secondary sources include Text books, journals, Formal reports and policy documents which supported the primary sources.

#### **3.1 Sampling procedure**

There are twelve higher institutions of learning in Adamawa state comprising of three (3) federal, seven (7) state-owned, and two (2) private. Quota and purposive sampling was employed such that each institution is adequately represented. The institutions had one hundred (100) questionnaires administered. Interviewees and those who participated in discussions were selected randomly but purposely.

#### **3.2 Justification of instrument and sampling**

The justification for the use of questionnaire especially is to illicit sincere responses since the questionnaire conceals the identity of the respondent. However, the interview and the FGDs

was intentionally but randomly selected. Effects of drugs are observable phenomenon, so it is clear that the participants will give their responses to the best of their abilities. On the issue of sampling, respondents from each school was randomly selected, that ensured that each school was well captured in the study.

## 4.0 RESULTS

### 4.1 Rate of Return of Questionnaires

Twelve higher institutions were earlier proposed as a scope of this study. However, one school (Sa'adatu College of Nursing and Midwifery, Mubi) could not form part of this study because the government of Adamawa State had halted its operation. Therefore, the questionnaires were distributed and retrieved from eleven institutions and a total of 992 questionnaires was returned; it will also serve as the basis for the analysis as shown below:

INSTITUTION	Frequency	Percentage %
Adamawa State University, Mubi	90	9.1
The Federal Polytechnic, Mubi	82	8.3
College of Health Technology, Mubi	100	10.1
College of Education Hong	100	10.1
Modibbo Adama University, Yola	80	8.1
Adamawa State Polytechnic, Yola	100	10.1
College for Legal Studies Yola	86	8.3
College of Nursing and Midwifery, Yola	98	9.9
Federal College of Education Yola	92	9.3
American University of Nigeria, Yola	78	7.8
Adamawa State College of Agric, Ganye	86	8.9

<b>Total</b>	<b>992</b>	<b>100</b>
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Field work, 2025

**Socio-Demographic Data of Respondents**

<b>Age Bracket</b>	<b>Frequency</b>	<b>Percentage</b>
18-29	593	59.8
30-39	300	30.2
40-49	74	7.5
50-59	25	2.5
Total	992	100.0
<b>Marital Status</b>		
Single	925	93.2
Married	62	6.0
Windowed/Separated	5	0.5
Total	992	100.0
<b>Religion</b>		
Christianity	550	55.4
Islam	440	44.4
Others	2	0.2

Total	992	100.0
<b>Current level of Education</b>		
Advanced Level	22	2.2
Undergraduate	800	80.6
Graduate	170	17.1
Total	992	100.0
<b>Occupation</b>		
Student	932	94.0
Teacher/Lecturer	50	5.0
Admin/Clerical Staff	10	1.0
Total	992	100.0

### Field Work, 2025

The socio-demographic data of the respondents provides valuable insight into the composition of the study population, shedding light on their age distribution, marital status, religious affiliations, education levels, and occupational backgrounds.

The age bracket distribution reveals that the majority of the respondents (59.8%) fall within 18-29 age range, indicating that the study population is predominantly youthful. This is followed by respondents aged 30-39, which make up 30.2% of the total. A smaller proportion, 7.5%, falls within 40-49 age group, while only 2.5% are between 50-59 years. The predominance of younger individuals suggests that the study might be focused on an environment such as a university setting or a community with a high youth population.

Marital status data indicates that a significant majority of respondents (93.2%) are single, with only 6.0% being married or separated, and a negligible 0.5% widowed. This further reinforces the youthful nature of the respondents, as younger individuals are more likely to be

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unmarried, especially in academic environments or urban settings where education and career pursuits are prioritized before marriage.

Regarding religious affiliation, the study population is fairly balanced between Christianity and Islam, with 55.4% identified as Christians and 44.4% as Muslims. A very small proportion (0.2%) falls under the "Others" category, indicating minimal representation of alternative religious beliefs. The almost equal distribution of the two dominant religions suggests a diverse but relatively homogeneous religious composition, which might reflect the religious demographics of the study area.

The respondents' educational background reveals that the vast majority (80.6%) are undergraduates, while 17.1% have completed their graduate studies, and only 2.2% have an advanced level qualification. This confirms that the study is conducted within a higher education institution, where most participants are still pursuing their first degrees or Diploma.

Lastly, the occupational data further supports this assumption, as an overwhelming 94.0% of the respondents are students. Teachers and lecturers constitute 5.0%, while administrative and clerical staff make up a mere 1.0%. This occupational breakdown clearly indicates that the research is centered on an academic institution, with students forming the core of the study group.

The next Table is a representation of the views of the respondents obtained on the subject of study. 'SA' stands for Strongly Agreed, 'A' stands for Agreed, 'D' stands for Disagreed, 'SD' stands for Strongly Disagreed while 'UD' stands for Undecided.

S/No.	Causes of Drug abuse among students in tertiary institutions	SA	A	D	SD	UD	TOTAL %
7	Students abuse drugs because they are completely ignorant of what drug abuse is and the potential health risks	300 (30.2)	500 (50.4)	100 (10.1)	91 (9.2)	01 (0.1)	992 (100%)
8	Your school clinic is functional and has qualified medical personnel who diagnose and prescribe drugs for students when they are sick	400 (40.3)	492 (49.6)	70 (7.1)	30 (3.0)	00 (0.0)	992 (100%)

9	Your school prohibits students from taking non prescribed drugs as a matter of policy	592 (59.7)	350 (35.3)	45 (4.5)	05 (0.5)	00 (0.0)	992 (100%)
10	Students in your school do take medicine that can quickly energize them and ease off stress since they know the impact of those medicines and can do so without consulting the doctor	600 (60.5)	292 (29.4)	75 (7.6)	24 (2.4)	01 (0.1)	992 (100%)
11	Drug abuse is common in your school because drugs are freely accessed in the school community	350 (35.3)	542 (54.6)	80 (8.1)	20 (2.0)	00 (0.0)	992 (100%)
12	Drug is common in your school because students access these drugs from a nearby community	552 (55.6)	400 (40.3)	37 (3.7)	03 (0.3)	00 (0.0)	992 (100%)
13	Peer pressure is a major reason why some students are into drug abuse	350 (35.3)	600 (60.5)	30 (3.0)	12 (1.2)	00 (0.0)	992 (100%)
14	Some students abuse drugs in order to cope with academic pressure	300 (30.2)	642 (64.7)	08 (0.8)	40 (4.0)	02 (0.2)	992 (100%)
<b>Causes of Drug abuse among students in tertiary institutions</b>							
15	Access to information on the internet and the use of media advertisement could be an influence on some students indulging in drug abuse	401 (40.4)	551 (55.5)	30 (3.0)	10 (1.0)	00 (0.0)	992 (100%)
16	Family background and parental attitudes toward drugs play a role in	492	450	27	23	00	992

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	influencing some of your students to engage in drug abuse	(49.6)	(45.4)	(2.7)	(2.3)		(100%)
17	There is no periodic practical awareness on the dangers of drug abuse in my school and that is why students are engaging in drug abuse	400 (40.3)	500 (50.4)	50 (5.0)	42 (4.2)	00 (0.0)	992 (100%)
<b>Commonly abused drugs among students</b>							
18	Some students in my school do take alcohol	350 (35.3)	602 (60.7)	30 (3.0)	10 (1.0)	00 (0.0)	992 (100%)
19	Some students do take amphetamines drugs such as Ritalin, Focalin in an overdose	400 (40.3)	502 (50.6)	55 (5.5)	33 (3.3)	02 (0.2)	992 (100%)
20	Some students use Anabolic Steroids or any related drug for the purpose of body building	252 (25.4)	700 (70.6)	35 (3.5)	05 (0.5)	00 (0.0)	992 (100%)
21	Some students use caffeine such as coffee, tea, soda in excess such that they have become addicted to it	222 (22.4)	600 (60.5)	60 (6.0)	10 (1.0)	00 (0.0)	992 (100%)
22	Some students use cannabis or marijuana	272 (27.4)	650 (65.5)	55 (5.5)	15 (1.5)	00 (0.0)	992 (100%)
23	Some students even have access to cocaine and are using it	400 (40.3)	512 (51.6)	60 (6.0)	20 (2.0)	00 (0.0)	992 (100%)

24	Some students use nicotine related drugs like cigarettes, heroin	500 (50.4)	441 (44.5)	36 (3.6)	14 (1.4)	01 (0.1)	992 (100%)
25	Some students use cough/cater related drugs in overdose	430 (43.3)	510 (51.4)	27 (2.7)	25 (2.5)	00 (0.0)	992 (100%)
26	Some students inhale other substances they feel will make them high or intoxicated such as solution, petrol, animal dung etc	300 (30.2)	652 (65.7)	25 (2.5)	14 (1.4)	01 (0.1)	992 (100%)
<b>Access to drugs</b>							
27	Some of this drugs are easily accessible in the school community	702 (70.8)	250 (25.2)	40 (4.0)	10 (1.0)	00 (0.0)	992 (100%)
28	Some of the drugs are accessed in the nearby community	410 (41.3)	502 (50.6)	46 (4.6)	34 (3.4)	00 (0.0)	992 (100%)
29	Some of this drugs are highly expensive and are mostly concealed; only the children of the rich and affluent can access or afford	400 (40.3)	510 (50.6)	42 (4.2)	40 (4.0)	00 (0.0)	992 (100%)
S/N	<b>The relationship between drug abuse and poor academic performance</b>						
30	The drug abusers have their circle and are interconnected with each other which make it more easily to access drugs that ordinarily one cannot get	405 (40.8)	515 (51.9)	35 (3.5)	25 (2.5)	02 (0.2)	992 (100%)
31	Students who abuse drugs most times find it difficult to cope with academic activities such as lecture;	430 (43.3)	512 (51.6)	20 (2.0)	30 (3.0)	00 (0.0)	992 (100%)



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	attendance and meeting up deadlines of assignment submission						
32	Students who abuse drugs usually have low or poor academic performance	410 (41.3)	510 (51.4)	36 (3.6)	35 (3.5)	01 (0.1)	992 (100%)
33	Students who abuse drugs are most likely to engage in examination malpractice and other forms of academic compromises	350 (35.3)	550 (55.4)	50 (5.0)	42 (4.2)	00 (0.0)	992 (100%)
34	Students who abuse drugs sometimes completely loose focus on why they are in school, and instead, pay more attention to their drug culture	400 (40.3)	542 (54.6)	30 (3.0)	20 (2.0)	00 (0.0)	992 (100%)
<b>Age bracket of youths that engage in drug abuse</b>							
35	The dominant age group that engage in drug abuse are between the ages of 18-29	390 (39.3)	440 (44.4)	45 (4.5)	15 (1.5)	02 (0.2)	992 (100%)
36	The dominant age group that engage in drug abuse are between the ages of 30 – 39	401 (40.4)	539 (54.3)	35 (3.5)	16 (1.6)	01 (0.1)	992 (100%)
<b>The likely period of students exposure to drugs</b>							
37	Most of the students who abuse drugs on campus were exposed to drugs even before being admitted as students	400 (40.3)	502 (50.6)	33 (3.3)	17 (1.7)	00 (0.0)	992 (100%)
38	Most of them started abusing drugs on campus as a result of peer pressure	430 (43.3)	500 (50.4)	37 (3.7)	25 (2.5)	00 (0.0)	992 (100%)

## **Field Work, 2025**

### **Causes of Drug Abuse among Students in Tertiary Institutions**

Several factors contribute to drug abuse among students. A significant percentage (80.6%) of respondents agree that students abuse drugs due to ignorance of what drug abuse entails and its health risks. This indicates that inadequate awareness and lack of proper education on drug-related consequences contribute significantly to the issue.

Additionally, 90% of respondents agree that school clinics with qualified medical personnel are functional and provide prescribed medications to students when sick. However, the availability of prescribed drugs may not completely prevent self-medication among students.

Policies prohibiting unprescribed drug intake are in place, with 95% acknowledging that their school has such policies. However, the effectiveness of these policies remains questionable, considering the high percentage of students admitting to drug abuse.

Moreover, 89.9% of respondents stated that students take medication to boost energy and ease stress without consulting a doctor. This indicates a prevalent culture of self-medication, which could lead to dependency and long-term health consequences.

Peer pressure emerges as a strong factor in drug abuse, as 95.8% of students agree that their peers influence them to use drugs.

Similarly, academic pressure contributes significantly to drug abuse, as 94.9% of respondents agreed that students take drugs to cope with school demands. The combination of peer influence and academic stress creates an environment where drug abuse is normalized.

Access to drugs within the school environment is another major factor. About 89.9% of respondents agree that drug abuse is prevalent in their school because drugs are easily accessible in the community.

Additionally, 95.2% of students' state that they access drugs from nearby communities, suggesting that external influences also play a role in student drug use.

Another significant contributor to drug abuse is exposure to information through the internet and media advertisements.

About 95.9% of students agree that exposure to such content influences drug use. Furthermore, 95% of respondents believe that family background and parental attitudes toward drugs significantly affect students' decisions to engage in drug abuse. This suggests that students from families where drug use is normalized are more likely to experiment with substances.

A lack of practical awareness programs on drug abuse is another contributing factor. About 90.7% of respondents agree that there is no periodic awareness program on drug abuse in their schools, leading to increased engagement in substance use. This highlights the need for

more structured and regular awareness campaigns to educate students on the dangers of drug abuse.

### **Commonly Abused Drugs among Students**

Alcohol ranks high among the substances abused by students, with 96% of respondents acknowledging that some students consume it. This aligns with the global trend where alcohol is one of the most commonly abused substances among young people. Amphetamines, such as Ritalin and Focalin, are also widely abused, with 91% of students confirming its usage in their school. These stimulants are often taken to enhance focus and stay awake for extended periods, especially during exam periods.

Anabolic steroids, commonly used for bodybuilding purposes, are also reported, with 96% of students acknowledging its abuse.

Caffeine-containing products such as coffee, tea, and soda are consumed excessively, with 95.9% confirming addiction to these substances. Although caffeine is legal, excessive consumption can lead to dependence and negative health effects.

Cannabis or marijuana is another commonly abused drug, with 92.9% of respondents confirming its usage among students.

The accessibility of cannabis in many communities makes it a preferred drug among young people.

Similarly, 95.2% of respondents indicate that some students have access to and use cocaine. The high cost and illicit nature of cocaine suggest that only a limited number of students can afford it, likely those from affluent backgrounds.

Nicotine-related substances such as cigarettes and heroin are also used by students, with 94.9% acknowledging its abuse.

Over-the-counter medications, such as cough syrups, are also abused, with 94.9% of students confirming its excessive consumption.

Furthermore, 95.9% of respondents state that some students inhale substances like solution, petrol, and animal dung to get high. This suggests that students are willing to experiment with a variety of substances to achieve intoxication.

### **Access to Drugs**

The availability of drugs plays a significant role in substance abuse among students. About 96% of respondents agree that drugs are easily accessible within their school community, indicating a major gap in regulatory measures.

Furthermore, 91.9% of students confirm that drugs can be accessed in nearby communities, emphasizing the need for stricter enforcement of drug control policies.

While some students access inexpensive and easily available drugs, 91.7% of respondents state that some drugs are highly expensive and are mostly concealed, making them accessible only to wealthy students. This suggests that economic factors influence the type of drugs students consume, with those from affluent backgrounds engaging in more expensive substance abuse.

### **The Relationship Between Drug Abuse and Poor Academic Performance**

The connection between drug abuse and academic performance is well established in the responses.

About 92.7% of students agree that drug abusers form social circles which make access to drugs easier. This networking system creates a subculture that reinforces drug use and isolates abusers from mainstream academic activities.

Another significant impact is on academic engagement, with 94.2% of respondents agreeing that students who abuse drugs struggle with attending lectures and meeting deadlines for assignments.

Furthermore, 92.7% confirm that students who abuse drugs usually have poor academic performance. This suggests that substance abuse directly affects students' ability to concentrate and perform academically.

The study also indicates the connection between drug abuse and examination malpractice, with 90.7% of students stating that drug abusers are likely to engage in academic dishonesty. Substance abuse impairs judgment and decision-making, leading students to seek shortcuts in their studies.

Moreover, 94.9% of respondents agree that drug-abusing students lose focus on their academic goals and prioritize their drug culture instead. This confirms that substance abuse not only affects academic performance but also alters students' priorities and life goals.

### **Age Bracket of Youths that Engage in Drug Abuse**

The most dominant age group involved in drug abuse falls within the 18–29 range, as confirmed by 83.7% of respondents. This aligns with global trends where young adults are the most vulnerable to substance abuse due to peer influence, academic pressure, and social experimentation.

Additionally, 94.7% of respondents confirm that drug abuse is also prevalent among students aged 30–39. This suggests that drug abuse is not limited to younger students but also affects older students who may be dealing with work, family, and school pressures.

### **The Likely Period of Students' Exposure to Drugs**

The responses indicate that many students were already exposed to drug use before entering tertiary institutions, as confirmed by 90.9% of students. This suggests that early exposure to drugs during adolescence increases the likelihood of continued abuse in higher education.

Additionally, 93.7% of respondents state that peer pressure is the primary reason students start abusing drugs on campus. This further reinforces the impact of social influence on students' drug consumption behaviors.

### **4.2 Key Informant Interview/Discussions**

The researcher painstakingly interviewed twenty staff and twenty students in each of the institution that constitute the study area of this research. The interview gives more insight into their perception on what drug abuse is, the prevalence of drug abuse in these institutions and the impact of drug abuse on the academic performance of the students.

All the interviewees affirm that drug abuse is the use of conventional drugs without prescription from authorized medical personnel. They further affirmed that it could also mean taking of substances that alters the mood of a person, thereby making the person to feel "high".

They revealed that students engage in drug abuse on these campuses openly while others do it in secret. According to them, the drugs used in the open include codeine, tramadol, exoles, cigarette, shisha, marijuana, solutions, pentozolin, alcohol both locally made and brewed ones, etc. Only two (2) out of the twenty interviewees had no idea of an open drug abuse.

They further revealed that the drugs abused in secret include cocaine, Heroin and shisha. On how they get access to these drugs; the interviewees revealed that drug abusers get access from the regular vendors but use the drugs without prescription. While the illicit drugs are gotten from their "joints", "jungles" or dealers who are already familiar with their regular customers.

The interview also revealed that there are many reason why students engage in drug abuse. These include peer influence which is the major reason mentioned by all the interviewees; and to help them forget their sorrows or depression; others said it is lack of home training; while others said it is for adventure and pleasure. The interviewees further affirmed that majority of the students who engage in drug abuse started these acts on campus. Only few of them were indulge in it before enrolling as students.

On whether drug abuse have negative impact on students' academic performance, the interviewees affirmed that it does. They said that when drug abuse becomes addiction, attending lectures, becomes a problem. Students miss lectures and even examinations. Their performances become low as they lack the capacity and ability to concentrate. Their grades therefore become low; some end up as withdrawn students or they drop voluntarily. Another critical issue mentioned is that when these students drop out or are withdrawn, they still

remain on campus parading themselves as students while they are not, thereby actively luring the innocent ones into drug abuse.

The interviewees and those who participated in Focus Group Discussions suggested the following as ways of minimizing or eradicating drug abuse on campuses. First, they suggest that there should be in-depth and periodic education and sensitization on the dangers of drug abuse. Secondly, they suggested strict surveillance of the regular vendors of normal drugs in case they operate some covert activities of selling illicit drugs. They further recommended the pro-activeness of the Guidance and Counselling Units of the various institutions to look out for students that were doing well academically but suddenly begin to drop. The drop in academic performance could be a signal to something wrong. They further suggested strict checking of students in and out of campus at all times to be sure of what the students are carrying into the campus. Also, strict use of identity cards for entry by students and staff will help sort those who are members of the school community and those who are not. The visitors can therefore be subjected to scrutiny thereby fishing out bad eggs.

### **4.3 Findings**

This study reveals that drug abuse in higher institutions of learning in Adamawa state is prevalent and the age group that indulge in such act are the young adults between the ages of 18 - 29 and adults between the ages of 30 - 39.

It further revealed the commonly abused drugs which include Alcohol, Tramadol, Amphetamis-stimulants which helps one to stay focus and awake for extended periods; Anabolic-Androgenic Steroids - commonly used for body-building purposes; and caffeine which contain products such as coffee, tea and soda. Others include cannabis or marijuana; nicotine-related substances such as cough syrup. Some students inhale substances like solution, petrol and animal dung.

The study again revealed the causes for indulging in drug abuse which include easy access to drugs on campus and the near-by communities; other students were exposed to drug abuse before enrolling as students and when they became students, they try to influence others to join them; while others engage in drug abuse as a result of peer pressure; and still for others, it is an attempt to cope with depression or anxiety.

In addition, the study revealed that drug abuse has enormous negative impacts on students' academic performance. The distortion of the mind makes it difficult for drug abusers to cope with academic activities such as attending lectures, meeting-up deadlines for assignment submission. There is usually poor academic performance as a result of loss of focus from academics to paying more attention to their drug culture. Such students are likely to engage in examination malpractices and other forms of academics compromises. They are also easily influenced to join occult groups or engage in criminal vices like rape, theft, burglary, kidnapping since the urge for drug will push them to get money at all cost and to have a complete loss of sense of morality.

Lastly, the study reveals that there is no proper scrutiny and surveillance on the activities of drug vendors in these institutions which is why those selling conventional drugs may take advantage and sell illicit drugs. There is also no mechanism in place to ensure that over-the-counter drugs are strictly sold based on prescription by a medical personnel.

## **5.0 RECOMMENDATIONS**

In view of the above findings, I will promptly put forward recommendations that will help in minimizing drug abuse in our institutions of higher learning in Adamawa state.

1. There should be a concerted effort by the government at the state and local levels, and Non-Governmental Organizations (NGOs) to intensify sensitization on drug abuse and its dangers on people's health, social well-being and particularly, its negative effects on students' academic performance.
2. The institutions of higher learning should as a matter of policy have a functional and proactive Guidance and Counselling Units who will keep tract of individual's social and academic well-being; to ensure that any little trace of anti-social behaviour and a drop in academic performance is timely followed-up by a systematic and result - oriented counselling.
3. The institutions can deliberately put measures that will stop purchases of over-the-counter medicines without due prescriptions from authorized medical personnel within the campus; and also make effective collaborations with vendors/pharmacies around the school communities to insist on proper prescriptions before medicines are sold to individuals.
4. Parents should be encouraged not to expose their wards to extravagant life-style such as possession of too much money beyond what their essential needs would require. Excess money often leads to a life of adventure; and in most cases, drug abuse is one of such adventures.
5. The media organizations can also help by constant enlightenment on what constitutes drug abuse and the dangers of drug abuse. Pictorial demonstrations of these dangers and effects on the visual media can sink deeper into the minds of these young stars in higher institutions of learning and the general public.
6. The institutions can minimize entry of unwanted elements who may serve as syndicates into their campuses by a strict checking mechanisms at their entrances and places of exit. Knowing that these measures are in place may discourage people who have no business with academics from patronizing their premises.

## **CONCLUSION**

The use of illicit drugs or the abuse of conventional drugs has a devastating consequences especially on students who are meant to be in school for their studies and become useful members of the society. Drug abuse can cripple or truncate a vision for any meaningful life.

Therefore, it must be fought by all means and at all cost by all individuals, Government and Non-Governmental Organizations. Any responsible government and its institutions must periodically evaluate their success or otherwise in the battle against drug abuse. This will bring about new approaches and tactics in the war against drug abuse until it is significantly decreased or totally eliminated.

## REFERENCES

**A.O. Adeniyi** (2022), *Effects of Drug Abuse on the Academic Performance of Secondary School Students in Nigeria*. European Journal of Biology and Medical Science Research Vol.10, No.3, pp.,72-79.

**Bello, F.**, 2012. Kano: *Home of Drug Addicts*. The Nigeria Pilot Friday magazine July 27, 2012.

"**Drug**." The American Heritage Science Dictionary, Houghton Mifflin Company, via dictionary.com. Retrieved on 20 September 2007.

**Radda, S. I.** (2009), "*Youth Counter-Culture: Studies in Cultural Sociology*," in Abdullahi, A, S, et. al, eds. Foludex printers Ibadan.

**Gibbins, J.** (1976), *Research Advances in Alcohol and Drug Problems*. New York: John Wiley and Sons.

**Haladu**, (2003). *Drug Abuse and Nigerian Youth*, cited in Fatima, S. A. In Daily Truth 12th 2003 pp 13 "Drug" Dictionary.com Unabridged (v 1.1), Random House, Inc., via dictionary.com. Retrieved on 20 April 2018.

**Hoffmann, F.G.** (1969), *A Handbook on Drug and Alcohol Abuse: The Biomedical Aspect*. New York: Harper and Row Publishers.

**Harms, E.** (Ed.) (1993), *Drug and Youths: The Challenge of Today*. New York: Pergamon Press Inc.

**Hardet, R.A.**, Parker, H.A., and Anderson, W.A. (1977), *Sociology and Issues* (2nd Ed.) New York: Praeger Publishers.

**Kinch, J. W.** (Ed.) (1974), *Social Problems in the World Today*. London: Addison Weekly Publishing Company

**M.I Akanbi et. al** (2015), *Impact of Substance Abuse on Academic Performance among Adolescent Students of Colleges of Education in Kwara State, Nigeria*. Journal of Education and Practice ISSN 2222-1735 (Paper) ISSN 2222-288X (Online) Vol.6, No.28, 2015

**Misoi J Eunice** (2009) *Effects Of Drug Abuse On Students Performance A Case Study Of Kapseret Division Uasin Gishu District*



**National Institute on Drug Abuse** (2015) *The Science of Drug Abuse and Addition* 39(3), 461-492

**National Drug Intelligence Centre (NDIC)**, 2010. National Drug Threat Assessment retrieved from: <http://www.justice.gov/ndic/pubs38/38661/index.htm> on November 12, 2012.

**R.T. Nabavi and M.S. Bijandi** (2011). *A Literature review on Bandura's Social Learning Theory and Social Cognitive Theory*. ResearchGate, 2012.

**Weinstein, C.E. and Mayer, R. E.** (1986). *The teaching of Learning Strategies. Handbook of research and teaching*. P.3,315-327.

**West, L. & Graham, C.** 2005. *A survey of substance prevention efforts at Virginia's colleges and universities*. Journal of American College Health, 54(3): 185.29.

**World Health Organization, (WHO)** 2004. *Global Status Reports on Alcohol: Problem Associated with Alcohol*.