



SUBSTANCE USE AMONG STUDENTS IN HIGHER EDUCATION

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ABSTRACT

The use of substances among higher education students has become a major social and legal issue, which impacts physical health, mental health, academic success, and campus security. This research focuses on the trends, factors, and awareness levels regarding substance use among students in colleges and other institutions of higher learning. The paper also examines how the student has comprehended the legal provisions in place, prevention programs, and institutional responsibility towards curbing the abuse of substances in the academic setting. The study utilises a combination of doctrinal legal analysis and empirical data from surveys to assess the effectiveness of existing regulatory and awareness systems in mitigating substance-related risks. The research adds to the wider discussion on student welfare and legal protection in tertiary education and provides suggestions on how to enhance awareness, prevention approaches, and institutional protective measures to develop a healthier and safer learning environment.

Keywords: Substance Use, Higher Education, Student Health, Legal Awareness, Prevention.

INTRODUCTION

Youth are the assets of the nation. The current generation is the future power of the country. The majority of the youth are usually healthy, but some have a greater tendency to indulge in risky behaviours like the use of substances, which can result in damaged health. Substance use is addicting some of the young student due to several personal reasons and eventually impacts their studies, hurting their professional lives after college, leading to violence, cognitive impairments and other related effects. The students in colleges are in a sensitive stage of brain development, which makes them more vulnerable to drug use because of their biological and

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social nature. They can be characterised by a more dangerous use of substances and are more susceptible to the adverse effects.

Substance abuse is a rough term that is used to describe the use of harmful or dangerous psychoactive substances, which are alcohol, tobacco, and illegal drugs like opioids, heroin, amphetamines, and cannabis. Among the worldwide public health concerns are substance abuse disorders, which result in human suffering, economic loss, and become a serious threat to the social fabric of any community around the world. The paper will discuss the causes and effects of drug use among college students and the legal provisions of controlling the use of these substances. It also explains the institutional setup made by the learning institutions to avert drug abuse and safeguard the students' lives.

STATEMENT OF THE PROBLEM

The issue of substance use among the students in the tertiary education system has become a rising concern for the well-being of students and the academic environment. Despite the lawful provisions and policies, such as the Narcotic Drugs and Psychotropic Substances Act, 1985, and the awareness of students to the legal provisions and measures to curb substance abuse, there is a gap in terms of whether or not the educational institutions are taking steps to stem the vice.

The issue is that the restricted scope of attention is paid to the interpretation of the legal regulations and institutional mechanisms, and their implementation in the context of higher education. This provides a necessity to analyse the problem of substance use as a social phenomenon as well as in the legal and institutional context, which the current study seeks to investigate.

OBJECTIVES OF THE STUDY

- To investigate the issue of the prevalence and causes of substance use among higher education students.
- To examine the Indian legal system on substance use.
- To determine the degree of awareness of the students in terms of laws and preventive measures.
- To assess the policies in the institutions and the effectiveness of the policies in controlling the use of substances.

RESEARCH QUESTIONS

1. Factors leading to substance use among college students?
2. How well do students know the legal implications of using substances?
3. How do institutional policies affect student behaviour on the use of substances?

RESEARCH METHODOLOGY

The research methodology applied in the given study consists of the combination of a doctrinal analysis of the Narcotic Drugs and Psychotropic Substances Act (1985) on the one hand, the Cigarettes and Other Tobacco Products Act (2003) on the other hand, and the corresponding judicial precedents. In support of this, an empirical aspect is added by a systematic survey of students in various Higher Educational Institutions (HEIs) in order to measure the extent of legal knowledge about statutory penalties and institutional de-addiction services.

REVIEW OF LITERATURE

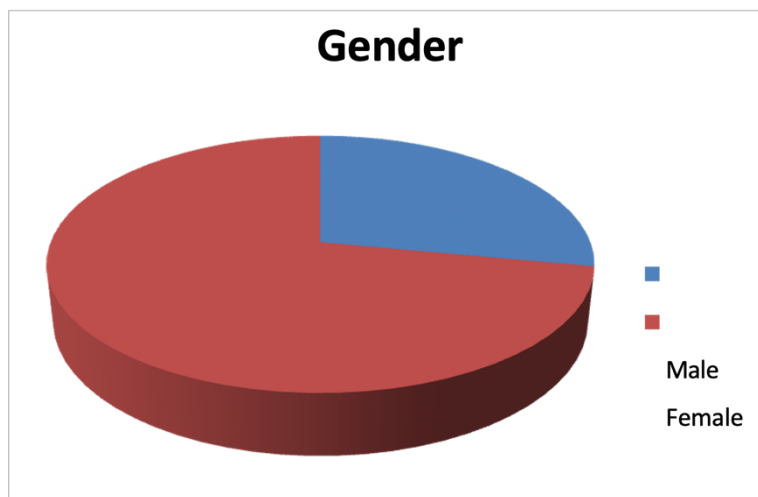
Available literature reveals that drug and alcohol consumption among students is a high-profile social and public health problem, with peer pressure, stress, and ignorance among the contributing factors. The works of the World Health Organisation and other Indian research reports point out that exposure to drugs and alcohol at an early age may have adverse implications on the mental health, educational results, and general development of the students. It is also noted in studies that awareness programs are vital, and educational institutions play an important role in prevention.

Nevertheless, the vast majority of the studies concentrate on either the reasons for substance use or preventive measures individually. Few studies have related legal awareness, institutional policy, and actual student behaviour in a congruent way. Such a gap means that a more integrated approach is necessary, and this study will focus on this gap.

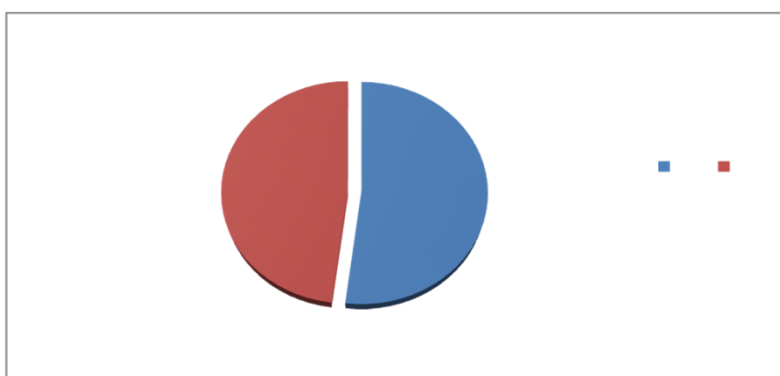
ANALYSIS AND DISCUSSION

Empirical Analysis of Survey Data: A survey was conducted among students to understand their awareness and perceptions regarding substance abuse, legal restrictions, and institutional awareness programmes in higher educational institutions. The findings highlight student opinions on the prevalence of substance use, contributing factors, and the effectiveness of institutional and legal awareness.

Demographic Profile of Respondents: The survey mainly consisted of students between the ages of 17 and 22 years, with the majority belonging to the 20–22 years age group. The respondents were predominantly women, followed by men.

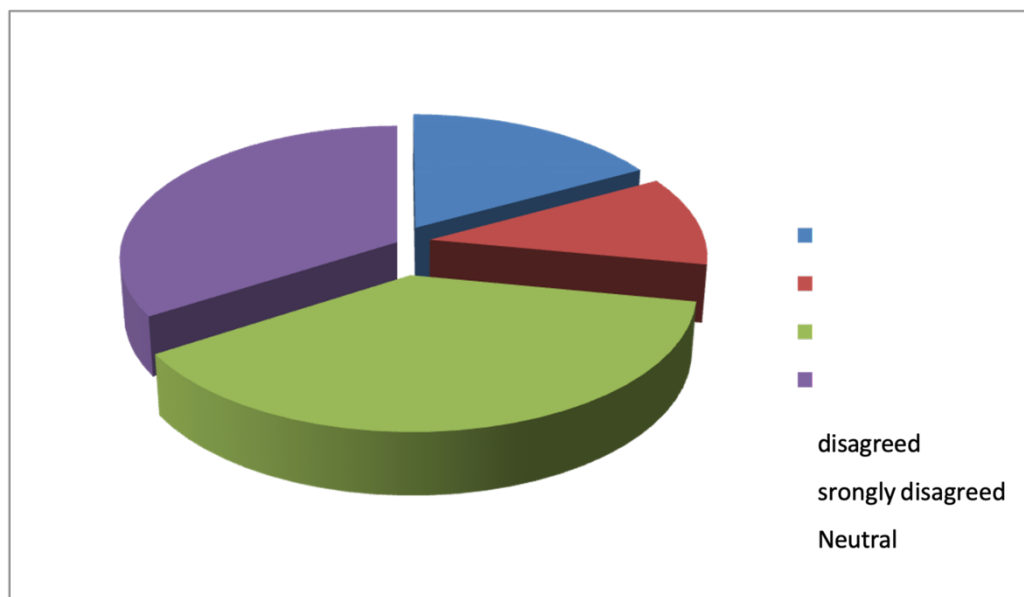


Perception Regarding Substance Use: When asked whether substance use, such as alcohol, tobacco, or drugs, is common among students in higher educational institutions, 52% of respondents answered “Yes,” while 48% answered “No.” This indicates that a slight majority perceive substance use as a prevalent issue within educational institutions. Further, 43% of respondents stated that they had personally observed substance use within their campus or student community, whereas 57% had not observed such incidents. Although a majority denied direct observation, the percentage of students witnessing such activities remains considerably significant and suggests that substance use exists within student environments.

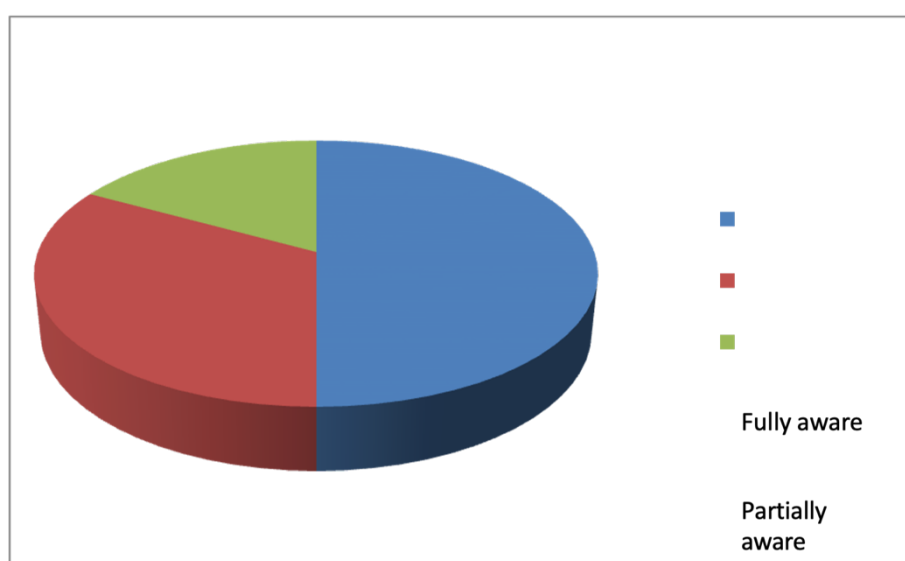


Academic Stress and Substance Abuse: The survey also examined whether academic stress contributes to substance use among students. About 34% of respondents agreed that academic stress is a contributing factor, while 17% disagreed and 11% strongly disagreed. Notably, 38% of respondents remained neutral on the issue.

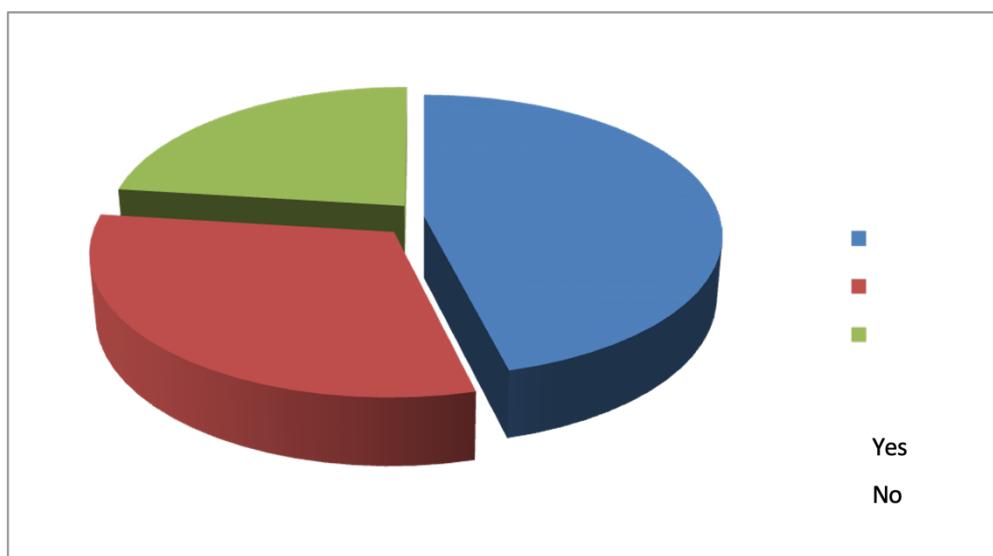
The findings suggest that a substantial section of students associate academic pressure with substance consumption, indicating that stress management and mental health support systems may play an important role in preventing substance abuse among students.



Awareness of Legal Restrictions: The empirical data demonstrate a comparatively high level of awareness regarding legal restrictions on the sale and consumption of alcohol, tobacco, and drugs to students or minors. Around 50% of respondents stated that they were fully aware of such legal restrictions, while 33% were partially aware. However, 17% reported that they were not aware of these legal provisions. This indicates that although awareness levels are relatively satisfactory, there remains a need for broader legal literacy and awareness campaigns within educational institutions.



Institutional Awareness Programmes: On the question of whether institutions had conducted awareness programmes on substance abuse or related laws, 46% of respondents answered “Yes,” while 31% answered “No” and 23% were uncertain. These findings reveal that although many institutions have initiated awareness programmes, a considerable number of students either remain unaware of such programmes or believe that no such initiatives are conducted. This highlights the necessity for institutions to strengthen communication and visibility of awareness campaigns.



Reasons for Substance Use among Students: The open-ended responses regarding the reasons students engage in substance use revealed several recurring themes. Respondents identified curiosity, peer pressure, lack of awareness regarding harmful effects, stress, emotional struggles, and experimentation as major reasons behind substance consumption among students.

Some respondents specifically mentioned that students consume substances “to know what it is,” while others observed that insufficient knowledge regarding the consequences of consumption contributes to such behaviour. These responses indicate that psychological, social, and informational factors collectively influence substance use among students.

Overall Findings: The empirical data suggest that students possess moderate to high awareness regarding legal restrictions on substance abuse and anti-ragging laws. At the same time, the survey reveals continuing concerns regarding the prevalence of substance use within educational institutions. Academic stress, peer influence, curiosity, and lack of awareness appear to be major contributing factors.

The study also demonstrates that while institutions have taken certain measures through awareness programmes, additional efforts are required to ensure wider participation, improved legal awareness, mental health support, and stronger preventive mechanisms within campuses.

DEFINITION OF SUBSTANCE USE

According to the World Health Organisation (WHO), substance abuse is defined as “Persistent or sporadic use of a drug inconsistent with or unrelated to acceptable medical practice”.

Refers to the use of selected substances, including alcohol, tobacco products, illicit drugs, inhalants, and other substances that can be consumed, inhaled, injected, or otherwise absorbed into the body with possible dependence and other detrimental effects.¹

The National Institute of Cancer defines drug abuse as the use of illegal drugs or the use of prescription or over-the-counter drugs or alcohol for purposes other than those for which they are meant to be used, or in excessive amounts. Substance abuse may lead to social, physical, emotional, and job-related problems.²

EXCEPTIONS

While the NDPS Act of 1985 strictly prohibits the general sale, possession, and consumption of narcotic drugs and psychotropic substances to combat drug abuse, the law is not an absolute ban. It provides specific exceptions that allow these substances to be used for medical and scientific purposes under strict government regulation.³

Medical Exceptions: The most common legal exception is the use of controlled substances for a bona fide medical purpose. In India, this is governed by the Narcotic Drugs and Psychotropic Substances (NDPS) Act, 1985. While Section 8 prohibits the possession/use of drugs, it explicitly excludes use for "medical or scientific purposes." Students with ADHD (prescribed Adderall/Ritalin) or chronic pain (prescribed opioids) are legally protected.

For the exception to hold, the student must prove:

¹ National Center for Health Statistics, 'Substance Use' (*Centers for Disease Control and Prevention*) <www.cdc.gov/nchs/hus/sources-definitions/substance-use.htm> accessed 28 March 2026.

² National Cancer Institute, 'Substance Abuse' (*NCI Dictionary of Cancer Terms*) <www.cancer.gov/publications/dictionaries/cancer-terms/def/substance-abuse> accessed 28 March 2026.

³ Ministry of Finance, Department of Revenue, *National Policy on Narcotic Drugs and Psychotropic Substances*

- A valid prescription from a registered medical practitioner.
- The quantity possessed aligns with the prescribed dosage.
- The substance was obtained through legal pharmaceutical channels.⁴

Scientific & Research Exceptions: Universities are hubs for clinical trials and pharmacological research. Section 9 of the NDPS Act allows the government to permit the cultivation, manufacture, and possession of drugs for research.⁵

Licensed research institutions or pharmaceutical laboratories may use controlled substances for: Developing new medicines, Analytical or forensic studies, and educational research under government supervision.

Students should look at the Institutional Review Board (IRB) requirements. A researcher (who may be a post-grad student) is not "possessing" drugs in a criminal sense but is acting under a delegated institutional license. Research "exceptions" are strict. If a student takes home a sample from a lab, the exception vanishes, and criminal liability (possession) attaches immediately.

Religious and Customary Exceptions: It is a more subtle grey area in laws, and usually pertains to constitutional rights. The NDPS Act is subordinate to Article 25 of the Constitution of India (Freedom of Religion). In certain states in India, Bhang (leaves of the cannabis plant) is not considered to be cannabis according to Section 2(iii) of the NDPS Act. This establishes a legal exemption for its use during festival periods such as Holi or Mahashivratri, even within or near the campuses.⁶

In the case of *Arjun Singh v. State of Haryana*,⁷ the Punjab and Haryana High Court acquitted the accused under the Narcotic Drugs and Psychotropic Substances (NDPS) Act, 1985, after being found in possession of 15.5 kg of bhang. The court decided that bhang, the leaves of the cannabis plant, do not come under the definition of cannabis (hemp) in Section 2(iii) of the NDPS Act, which bans only charas, ganja (flowering or fruiting tops) and mixtures of these

⁴ Amreen Shaikh et al., *Narcotic Drugs and Psychotropic Substance Usage in Hospital as per the NDPS Act* (CAHO 2020) <<https://www.caho.in/files/Final%20-%20Narcotic%20Drugs%20and%20Psychotropic%20Substance%20usage%20in%20Hospital.pdf>> accessed 28 March 2026.

⁵ *Narcotic Drugs and Psychotropic Substances Act 1985*, s 9.

⁶ 'The Curious Case of Bhang: Is it Legal in India?' (Cure By Design, 24 June 2025) <<https://curebydesign.in/the-curious-case-of-bhang-is-it-legal-in-india/>> accessed 28 March 2026.

⁷ *Arjun Singh v State of Haryana* 2005 CRI LJ 253

components. The court, therefore, ruled that bhang possession could be an offence, but not a punishable offence under the federal NDPS Act, and quashed the 10-year sentence imposed upon the appellant.

Students should, however, remember that although Bhang is not covered by the NDPS Act, its sale and possession are still subject to strict control under several State Excise Laws. Therefore, even with the federal exclusion, the university's "Zero Tolerance" policies generally take precedence over these traditional exemptions to preserve order on campuses.

LEGISLATIONS GOVERNING SUBSTANCE USE IN INDIA

The domestic law of India is consistent with the international duties under the Single Convention on Narcotic Drugs, 1961, the Convention on Psychotropic Substances, 1971 and the Convention against Illicit Traffic in Psychotropic Drugs, 1988. These conventions were the foundation of the Indian policy approach to legislation, specifically the implementation of the NDPS Act and represent the international agreement on the regulation of narcotics and psychotropic substances.

CONSTITUTIONAL FRAMEWORK

The basis of this framework is Article 47 of the Constitution, which guides the State to forbid the use of intoxicating beverages and drugs other than medicines. This defines substance control as a civic health requirement and justifies government intervention.⁸ Simultaneously, this directive should be interpreted alongside Article 21, which secures the right to life and personal liberty. The right to health has been expanded under Article 21 to incorporate judicial interpretation where the State must provide access to treatment, rehabilitation, and harm reduction measures.⁹ This brings about a harmony between prohibition and welfare in the constitutional set-up.

In the case of *Vincent Panikurlangara v Union of India* (1987),¹⁰ the Supreme Court held that a “healthy body is the very foundation for all human activities” and affirmed that the State has an obligation under Article 47 to protect and improve public health.

⁸ Constitution of India 1950, art 47

⁹ 'Right to Health in India: Constitutional Perspective' (UJA, 1 August 2023) <<https://uja.in/blog/legal-chronicle/right-to-health-in-india-constitutional-perspective/>> accessed 28 March 2026.

¹⁰ *Vincent Panikurlangara v Union of India* AIR 1987 SC 990.

Narcotic Drugs and Psychotropic Substances Act 1985: The Narcotic Drugs and Psychotropic Substances Act, 1985, governs substance use in India. It replaced earlier laws, such as the Dangerous Drugs Act of 1930 and the Opium Acts, and was passed to enforce international drug control conventions. The Act provides a prohibition regime in the form of strict criminalisation of activities connected with narcotic drugs and psychotropic substances, other than for medical and scientific purposes. The salient aspect of the Act is its strict liability nature in Section 35,¹¹ whereby the court assumes that a culpable mental state exists once possession has been established. Although it is a strict provision, the Act provides a narrow rehabilitative clause in Section 64A where those individuals found possessing small amounts are not to be prosecuted, provided that they voluntarily undergo a de-addiction treatment. This is an effort to promote punitive enforcement and therapeutic intervention.

Drugs and Cosmetics Act 1940: The Drugs and Cosmetics Act, 1940, functions as a regulatory tool in the legal system because it regulates the production, sale, and consumption of pharmaceutical products. This involves medicines of narcotic and psychotic agents, which have ensured that the use of such substances is undertaken strictly under medical guidance under controlled circumstances. The Act helps to achieve the broader goal of avoiding misuse and supporting legitimate medical access by regulating licensing, quality standards, and distribution. It therefore supplements the NDPS Act as it is aimed at legitimate and legal use as opposed to lawful prohibition.¹²

Mental Healthcare Act 2017: The Mental Healthcare Act, 2017, is a turning point in the Indian legislation as the substance use disorders are acknowledged as mental diseases and the right-based approach to treatment is established. It provides non-discrimination in healthcare in Section 21, confidentiality in Section 23, as well as regulation of mental health establishments to avoid inhuman treatment. It, however, poses a legal conflict with the Narcotic Drugs and Psychotropic Substances Act, n.d., which makes the use of substances a crime. As the NDPS Act is punitive in nature, the MHCA views addiction as a medical issue that needs treatment and recovery. This overlap raises the clash between criminalisation and health-based

¹¹ Narcotic Drugs and Psychotropic Substances Act 1985, s 35.

¹² Vikaas Budhwaar et al., 'A Comparison of Narcotic Drugs and Psychotropic Substances Act with Drugs and Cosmetics Act: Salient Differences' (2017) 5 Int'l J Drug Reg Aff 10, 10–19

protection, and also justifies a more gradual transition towards a more humane attitude to substance use.¹³

Cigarettes and Other Tobacco Products Act 2003: The Cigarettes and Other Tobacco Products Act, 2003, controls the use of tobacco and is very important in regulating exposure to substances, especially in schools. The Act puts into place measures to limit access and consumption by the population. Section 6(b) will forbid the sale of tobacco products within 100 yards of educational institutions, which will establish a protective buffer zone that will restrict accessibility among students. Besides, Section 4 forbids smoking in areas, and this also extends to the learning institutions, thus they can be enforced on the campuses.¹⁴

Juvenile Justice (Care and Protection of Children) Act 2015: The Juvenile Justice Act offers a significant level of protection under the law, especially concerning minors. Section 77 has made it a crime to supply intoxicating substances such as narcotics and tobacco to children and has imposed severe punishment.¹⁵ This, instead of criminalising the minor, criminalises the supplier and, as such, the child protection in the legal system is enhanced. It also causes a legal impact of differentiation in terms of which those who provide substances to underage people receive more severe punishment than those who actually use them, unless there is a valid medical necessity.

In *Niyas v State of Kerala*,¹⁶ the Kerala High Court held that simple possession of small amounts of contraband around schools does not create the necessary element of breach of Section 77 of the Juvenile Justice Act, which requires giving or causing the giving of substances to children. Although the court pointed out that prosecution under the NDPS Act is still valid, it made it clear in the formulation of Section 77 that it requires specific intent to supply and not proximity.

Drug De-Addiction Programme (DDAP): The Drug De-Addiction Programme aims at offering treatment services, developing institutional capacity, and monitoring trends in

¹³ Arpit Parmar and others, 'National Drug Laws, Policies, and Programs in India: A Narrative Review' (2024) 46 *Indian J Psychol Med* 5, 5–13

¹⁴ Akash Pradhan and others, 'Cigarettes and Other Tobacco Products Act (COTPA) Implementation in Education Institutions in India: A Cross-sectional Study' (2020) 6 *Tob Prev Cessation* 51, 51–57

¹⁵ Juvenile Justice (Care and Protection of Children) Act 2015, s 77.

¹⁶ *Niyas v State of Kerala* (Kerala HC, Crl MC No 3934 of 2018, 23 July 2018).

substance use. It is a significant part of the demand reduction plan, and it aims at equipping the healthcare system to respond better to substance dependence.¹⁷

National Action Plan for Drug Demand Reduction (NAPDDR), 2018: The National Action Plan for Drug Demand Reduction, 2018, is an organised initiative to tackle substance use by prevention, awareness, identification, counselling, treatment and rehabilitation. It is also focused on lessening stigmatisation related to substance use and enhancing research and data collection, which in turn allows evidence-based policymaking. The plan indicates a move in the direction of a holistic approach to public health. Other ancillary programmes like the National AIDS Control Programme, National Viral Hepatitis Control Programme, National Tele Mental Health Programme, and Ayushman Bharat are other supporting programmes that incorporate substance use interventions into extensive healthcare systems.¹⁸ These programs deal with related health hazards and the accessibility to treatment services, which implies the attempt to make substance utilisation a part of the general health policy.

Institutional Mechanism: The enforcement of the legal system is done using a multi-agency system. The nodal organisation in demand reduction is the Ministry of Social Justice and Empowerment, whereas enforcement is managed through departments like the Narcotics Control Bureau, the Central Bureau of Narcotics, and the state police and excise departments. It is an institutional arrangement that is characterised by a coordinated mechanism of enforcing regulations as well as welfare and rehabilitation. Also, awareness, prevention and treatment of substance use can be addressed with the help of efforts like *Nasha Mukta Bharat Abhiyan* and de-addiction and rehabilitation centres. Such interventions broaden the legal framework to include the use of other substances other than narcotic drugs.

PUNISHMENT

In India, the use of substances is subject to several legislations, and the penalty may include a sentence or fines based on the substance used, quantity and intent of use or commercial trade. The main legislation is the Narcotic Drugs and Psychotropic Substances (NDPS) Act, 1985 and the rest of the legislation is the COTPA, which governs tobacco and the JJ Act that safeguards children.

¹⁷ 'Steps Taken to Prevent Substance Addiction Among Youth' (*PIB*)

<<https://www.pib.gov.in/PressReleasePage.aspx?PRID=2244520®=48&lang=2>> accessed 28 March 2026.

¹⁸ Ministry of Social Justice and Empowerment, 'National Action Plan for Drug Demand Reduction'

<<https://socialjustice.gov.in/schemes/42>> accessed 28 March 2026

The Narcotic Drugs and Psychotropic Substances (NDPS) Act, 1985: Enacted in 1985 and brought into force on November 14, 1985, this Act has undergone four major amendments: 1988, 2001, 2014, and most recently, the NDPS (Amendment) Act, 2021.

Consumption (Section 27): Specific Hard Drugs: In the example of cocaine, morphine and heroin, the punishment is a hard jail sentence of not more than 1 year or a fine of not more than 20,000, or both.

Other Drugs: For any other drug not mentioned specifically, it is rigorous imprisonment not less than 6 months, not less than 10,000 rupees and not less than both.

Possession and Trafficking: Small Quantity: Life imprisonment of less than one year or a fine of 10000.

Commercial Quantity: Rigorous imprisonment for 10 to 20 years and a fine of ₹1 lakh to ₹2 lakhs.¹⁹

Reformative Provisions (Section 64A): An important provision which will enable addicts who seek medical help to quit de-addiction on their own free will in an institution recognised by the government to receive immunity against prosecution on the condition that they undergo the treatment to completion.

Repeat Offences: According to the amendment model of 2021, repeat offenders receive 1.5x the normal punishment.

Section 32B of the Narcotic Drugs and Psychotropic Substances Act, 1985 provides that the courts have the power to increase the minimum sentence by some aggravating factors. Section 32B(d) is one of the factors of the time an offence is committed in or around an educational premise or student-frequented area, which is identified to understand the high risk that is posed to the youths. The clause provides the courts with free rein to take a look at the situation, including aspects such as participation of minors or organised crime, to enforce more severe and relevant punishment.²⁰

¹⁹ See fn 15, s 27.

²⁰ Ibid ss 64A and 34B.

Cigarettes and Other Tobacco Products Act (COTPA), 2003: University campuses are open social places, and so, smoking is a punishable act, which includes a penalty of up to 200 as a fine.

Sale to Minors: This is a prohibition according to which no one under the age of 18 years should be sold tobacco.

The 100-Yard Rule: This is a stern prohibition of selling any tobacco product within a radius of 100 yards (91 meters) of any educational institution.

Hookah Bans (State-Specific): Since 2017/2018 Since 2017/2018, states, such as Gujarat and Maharashtra, have enhanced the penalty of the illegal hookah bars to up to 1-3 years of jail and a fine of up to 1 lakh.²¹

Juvenile Justice (JJ) Act, 2015: This Act, which replaced the 2000 version, provides enhanced protection for students under the age of 18.

Supplying Minors with Intoxicating Liquors, Narcotics or Tobacco Substances (Section 77): Any such individual who supplies a minor with intoxicating liquor, narcotics or tobacco substances is subject to strict imprisonment up to 7 years and a fine of up to 1 lakh rupees.

(Amendment) 2021: New clarifications on this point are that even substances that pass into stupefying substances, such as whiteners or inhalants, when they are given to minors, are covered under this section.

UGC DIRECTIVES AND INSTITUTIONAL POLICIES

The Nasha Mukta Bharat Abhiyaan (NMBA) is now in charge of institutional discipline and has entered 5 years of operation in 2025. The programme, undertaken by the Ministry of Social Justice and Empowerment, follows a coordinated strategy that emphasizes on creation of awareness, outreach in communities and access to treatment, where institutions of higher learning have been cited as major locations where preventive action can be taken.

²¹ National Tobacco Control Programme, Ministry of Health and Family Welfare (India), 'Guidelines for Law Enforcers for effective implementation of Tobacco Control Laws 2024' (13 September 2019) <<https://ntcp.mohfw.gov.in/assets/document/Guideline-manuals/Guidelines%20for%20law%20enforcers%20Oct.pdf>> accessed 28 March 2026

Mandatory Awareness (2024): On January 2, 2024, the UGC issued a notification, which mandated HEIs to adopt anti-drug declarations and perform mass awareness pledges (the biggest of which took place on August 12, 2024). These are to institutionalise the entry-level prevention engagement and instil the culture of accountability and awareness among students through continuous campus-based activities.²²

Curricula Integration (2025): The UGC passed a circular on May 30, 2025, which required all institutions of higher learning to include chapters about the dangers of drug abuse in their official curricula. This indicates a transition to a regularised awareness-building to the systematic academic intervention, to make sure that substance use is a point in formal education and long-term behaviour change models.²³

Current Infrastructure (2026): By the year 2025-2026, there are now 780 or more government-approved de-addiction centres, with dedicated addiction treatment facilities being incorporated into government hospitals, as part of supporting the rehab-over-jail legal philosophy. Independent of these centres, there is a national coordination programme with national programmes like the National Action Plan of Drug Demand Reduction, which enhances access to counselling, treatment and rehabilitation services in both urban and rural sectors.

INSTITUTIONAL CURRICULUM ON SUBSTANCE USE

Higher Educational Institutions (HEIs) in India abide by strict guidelines as stipulated by the University Grants Commission (UGC) and the NDPS Act, 1985. Three major Indian universities and their official substance use policy and disciplinary measures are listed below:

Tata Institute of Social Sciences (TISS), Mumbai: TISS also has a highly strict atmosphere in terms of in-drinking, which has merged its policies with the Government of India (GoI) legal regulations on the issue and institutional ethical standards.

²² 'UGC Notified Regarding the Implementation of Awareness Activities and Institutional Mechanisms for Nasha Mukta Bharat Abhiyaan (NMBA) in Higher Education Institutions' (*Team Lease*, 13 October 2025) <<http://www.teamleaseregtech.com/updates/article/48064/ugc-notified-regarding-the-implementation-of-awareness-activities-and-/>> accessed 28 March 2026

²³ 'University Grants Commission issues circular to include chapters on the dangers of drug abuse' (*Complinty*, 30 May 2025) <<https://complinty.com/legal-update/university-grants-commission-issues-circular-to-include-chapters-on-the-dangers-of-drug-abuse-2-18796/>> accessed 28 March 2026

Policy: The institute makes all buildings, hostels, dining halls and other public areas Non-Smoking and Substance-Free Zones. The students should be required to sign a document upon admission, which recognises that the consumption of alcohol, tobacco, and narcotics is highly forbidden on and around the campus, with prior knowledge and prior acceptance of campus regulations.

Disciplinary Actions: Immediate Expulsion: In contrast to other universities, which provide numerous warnings, TISS's honour code mandates that in the case where a student is discovered consuming or in possession of intoxicating substances within the hostel or on campus, they can be expelled immediately, hence the strict deterrent-based strategy. Under the NDPS Act, severe violations are reported to the local police, hence extending disciplinary measures beyond the institution into formal litigation where necessary.²⁴

Yenepoya (Deemed to be University): The Yenepoya has one of the most elaborate and formulated Substance Abuse Prevention policies, whereby the offences are classified to offer a way of rehabilitating the minor incidents without compromising the regulatory provisions.

Policy: The university has an Institutional Substance Abuse Committee (ISAC). It forbids the illegal acquisition, selling, and consumption of any substances that are subject to the NDPS Act. They also perform checks of Reasonable Suspicion and make it possible to detect and intervene proactively.

Disciplinary Actions: First-time/Suspicion: In cases where the involvement cannot be demonstrated beyond a reasonable doubt, a verbal warning is issued, and the student is educated about the laws, with the aim of making them aware and discouraging them, and not penalising the student.

Habitual/Second-time Offence: This is a suspension of at least one week. They are expected to undergo regular compulsory counselling sessions within this period, as well as with their parent or guardian, which was rehabilitative and corrective. Severe Violation: One year/semester suspension or expulsion, where the student is barred entirely from using the university facilities or hostels, guaranteeing institutional discipline and safety.

²⁴ Tata Institute of Social Sciences, 'Handbook for Students 2016-17' (2016)
<https://tiss.ac.in/uploads/files/Students_Handbook-2016-17-online_version.pdf> accessed 28 March 2026.

Severe Violation: One year/semester suspension or expulsion, where the student is barred entirely from using the university facilities or hostels, guaranteeing institutional discipline and safety.²⁵

Amity University: The disciplinary jurisdiction of Amity has been made to be in the entirety to students until, in the case of students, a so-called Deemed Submission to its rules is reached, and therefore to ensure a continuity of regulatory control.

Policy: According to their Student Disciplinary Policy, consumption of drugs or intoxicants (except when prescribed by a doctor) is one of the significant violations of discipline. The policy clearly states that the underage use of a controlled substance during duty or on campus is a punishable offence, which reinforces a harsh campus culture.

Disciplinary Actions: Financial Punishments: Amity frequently uses a particular fine, which is determined by the Chairperson of the Academic Council, when there is a slight violation of the code of conduct, which guarantees that corrective measures are taken instantly.

Academic Impact: Students can be barred from taking examinations for a year or more, which will have a direct effect on academic progress. Rustication: In severe drug-related crimes, the university will impose rustication (temporary withdrawal) or a complete prohibition on admission to any other courses of the institution, which is a very strong institutional enforcement.²⁶

To sum up, the substance abuse in Higher Educational Institutions (HEIs) needs to be shifted to a paradigm where punishment should be substituted with an extensive socio-legal approach. Although the NDPS Act (1985) has an effective deterrent in place, the continuous increase in addiction among the youths means that the law cannot prohibit the vice unless there is proper legal literacy.

²⁵ Yenepoya University, 'Policy on Substance Abuse Prevention' (2024) <http://www.yenepoya.edu.in/img/pdf/Policy_on_Substance_abuse_Prevention.pdf> accessed 28 March 2026.

²⁶ Amity University, Disciplinary Policy V2.0 (October 2023) <www.amity.edu/un/pdf/EXAMINATIONS_POLICIES/DISCIPLINARY-POLICY-V2.0-OCT2023.pdf> accessed 28 March 2026.

FINDINGS

The use of substances in higher education among students is a multi-factorial issue, as it depends on peer pressure, academic stress, and lack of awareness, and it is a complex social and behavioural problem.

The law of India, and especially the Narcotic Drugs and Psychotropic Substances Act, 1985, provides stringent rules on control and prohibition of narcotics and psychotropic substances, with a few exceptions being given to the medical and scientific use of the substances.

The law has two-sided solutions to the problem, in which regulating law applies substance use as both a criminal offence and a health issue under welfare-related acts, which is a balance between punishment and rehabilitation.

Schools and colleges have come up with policies and disciplinary measures to regulate drug use, but these measures differ in severity and the nature of the policies used in the different schools.

The level of awareness of students on the issue of legal provisions and implications of substance use is still low, which minimises the effectiveness of the current preventive practices.

SUGGESTIONS AND RECOMMENDATIONS

The legal awareness of students on substance use and its effects needs to be enhanced, especially on laws such as the Narcotic Drugs and Psychotropic Substances Act, 1985, through awareness programmes and academic interest.

Schools and colleges ought to integrate thorough substance abuse education, including its legal and health consequences, into the school curriculum rather than depending on the periodic awareness initiatives.

The institutions need to develop and strengthen effective systems of monitoring and make sure that disciplinary actions are balanced by providing students with a balance between counselling and rehabilitation services.

There should be more coordination among schools and the enforcement agencies so that legal and other existing regulation mechanisms are properly implemented.

The institutes must encourage early intervention measures, such as peer awareness programmes, to prevent the use of substances at a relatively early stage.

CONCLUSION

The current crisis of drug addiction among HEI students shows a severe failure in the current preventative mechanisms. The law cannot be a panacea; institutional accountability should be offered to complement the NDPS Act. It is both morally and legally the duty of educational institutions to ensure that their in-house codes do not conflict with Section 64A of the Act, so that students who volunteer to de-addict themselves are not expelled on the spot. Increasing campus-based surveillance and nurturing a support-first culture is not only an element of discipline but also a key investment in the safeguarding of the most valuable assets in the country.

Appendix A (Questionnaire)

The following questionnaire was used to collect primary data for the study on substance use among students in higher education institutions.

Age Group:

- 17–19
- 20–22
- 23–25\
- Above 25

Gender:

- Male
- Female
- Non-binary
- Prefer not to say

Do you think substance use is common among students in higher education institutions?

- Yes
- No

Have you personally observed substance use on your campus or among students?

- Yes
- No

Do you think academic stress leads to substance use?

- Agree
- Neutral
- Disagree
- Strongly Disagree

Are you aware of legal restrictions on substances such as alcohol, tobacco, and drugs?

- Fully aware
- Partially aware
- Not aware

Has your institution conducted any awareness programmes regarding substance use?

- Yes
- No
- Maybe