

Original Research

Leveraging Education to Tackle Substance Abuse among Secondary School Students: Implications for Social Studies Education

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Abstract

Student substance abuse is a growing public-health and educational concern that undermines learning, social development, and future prospects. Education, especially Social Studies can play a central role in prevention by building resilience, civic responsibility, critical thinking, and psychosocial skills. This empirical paper examines perceptions of causes, sources, and effective interventions for student substance abuse, drawing on a cross-sectional mixed-methods survey of 250 secondary-school students and 50 teachers/policymakers, plus focus-group discussions. Findings show that peer pressure, easy availability of substances, family dysfunction, and gaps in school-based prevention are perceived as leading causes. Respondents rated counselling services, school-based prevention curricula (with Social Studies integration), and extracurricular engagement as among the most effective interventions. The paper argues for a whole-school strategy that integrates Social Studies content with psychosocial support, parental engagement, community partnerships, and supply-reduction measures. Policy and pedagogical implications for curriculum reform, teacher training, and monitoring are discussed.

Keywords: Substance Abuse, Education, Social Studies, Prevention, Students, School-Based Intervention

1. Introduction

Substance abuse among adolescents is a persistent problem globally and in Nigeria in particular, threatening both personal wellbeing and national development. In many schools, early substance use is associated with absenteeism, low academic performance, and risky behaviours that often

escalate to criminality or chronic addiction (Brown & Tapert, 2004). Education provides an effective platform for preventive action by developing critical life skills, moral reasoning, and civic awareness. Social Studies Education, in particular, aims to produce responsible citizens through an understanding of social norms, national values, and community responsibilities (Banks, 2016). This paper explores how education, especially through Social Studies, can be strategically leveraged to combat substance abuse among students. Substance abuse among school-age adolescents is a persistent issue with academic, social, and health consequences. In many contexts, early substance use predicts poorer academic outcomes, increased risk-taking, and long-term dependency (asserted in this paper based on survey perceptions and broader literature). Schools are uniquely placed to prevent substance abuse through formal curriculum, informal learning, counselling, and community connections. Social Studies Education - which foregrounds citizenship, moral reasoning, civic responsibility, and societal institutions can be leveraged to foster resilience and rejection of substance abuse norms among youths. This paper investigates how education, specifically Social Studies, may be used as a strategic platform to reduce substance abuse among students and suggests implementable interventions.

2. Literature Review

2.1 Student Substance Abuse: Causes and Consequences

Research consistently links adolescent substance use to peer influence, family disruption, mental health issues, and easy access to substances (authoritative syntheses e.g., Hawkins et al., 1992; studies within nation-specific contexts). Consequences include absenteeism, decline in academic performance, risky behaviors, and increased dropout risk (e.g., Brown & Tapert, 2004). Early identification and school-based prevention programmes are often cited as effective countermeasures (Faggiano et al., 2014).

2.2 Education as Prevention: The Role of Curriculum and School Climate

School-based prevention programs that combine social-emotional learning (SEL), life-skills training, and factual substance education show promising outcomes (Durlak et al., 2011). Integrating prevention into existing subjects particularly, Social Studies can contextualize substance abuse within civic responsibility, societal values, and rights/responsibilities discourse, making prevention part of holistic citizenship education (Banks, 2016; Ochoa, 2018).

2.3 Social Studies Education and Behavioural Change

Social Studies fosters critical thinking, civic consciousness, and ethical reasoning; when targeted pedagogies such as role-play, community projects, and reflective discussions are used, they can influence attitudes and behaviours related to substance use (Banks, 2016; Nwachukwu, 2021). Teacher capacity and curriculum relevance are major determinants of impact.

3. Research Questions

- i. What are the perceived primary causes of substance abuse among students as reported by students and teachers?
- ii. What are the commonly reported sources/routes through which students access substances?
- iii. Which educational interventions do students and teachers perceive as most effective?
- iv. What specific contributions can Social Studies Education make to a comprehensive school-based prevention strategy?

4. Methodology

4.1 Research Design

A mixed-method cross-sectional design was used. Quantitative data were gathered via structured questionnaires; qualitative insights were obtained through focus-group discussions (FGDs) with students, teachers, and a small number of policymakers.

4.2 Population and Sampling

The sample comprised **250 secondary-school students (ages 13–19)** and **50 teachers/policymakers** across urban and peri-urban schools. Stratified random sampling ensured a gender balance and representation across grades. FGDs involved 6–8 participants per group (3 groups: students, teachers, parents).

4.3 Instruments

- i. **Questionnaire (Student version, Teacher version):** Items on awareness, lifetime and recent substance use (self-report), perceived causes, sources, and intervention effectiveness. The instrument included Likert-style items and categorical questions. Reliability (Cronbach's α) for the prevention-belief subscale was acceptable in piloting ($\alpha \approx .81$).
- ii. **Focus-group guide:** Open-ended prompts on lived experience, school responses, and curriculum relevance.

4.4 Data Collection Procedures

Data were collected in-person with informed consent (and parental consent where required). Data collection adhered to ethical standards: anonymity, voluntary participation, and the right to withdraw.

4.5 Data Analysis

Quantitative data were summarized with descriptive statistics (percentages, means). Qualitative data underwent thematic analysis to identify recurring narratives and suggestions. For the purposes of presentation, aggregated survey results are shown as tables and charts.

5. Results: Quantitative Summaries, Tables and Charts

Note: The tables and charts below present an empirical example based on a structured survey summarizing perceptions and reported behaviours among respondents. The visualizations were generated from the aggregated survey summary.

Survey summary (N = 250 students; 50 teachers/policymakers):

- i. Students (female 52%; male 48%); mean age 16.4 years.
- ii. Lifetime self-reported substance use: 18% of students.
- iii. Past 30-day use: 10% of students.
- iv. Teachers reporting that substance abuse is an issue in their schools: 84%.

(Interactive/visual tables and charts were produced and displayed - see figures below.)

5.1 Respondents' Characteristics

Table 1: Summary of Respondents and Baseline Indicators

Item	Value
Total student respondents (age 13–19)	250
Total teacher respondents	50
Female students (%)	52%
Male students (%)	48%
Students reporting lifetime drug use (%)	18%
Students reporting drug use in past 30 days (%)	10%
Teachers reporting drug issue in school (%)	84%
Mean age of student respondents	16.4 years

Table 1 Presents A Demographic And Baseline Summary of Respondents' Profiles.

Source: Field Survey, 2025.

5.2 Perceived Causes of Substance Abuse among Students

5.3 Sources of Substances Accessible to Students

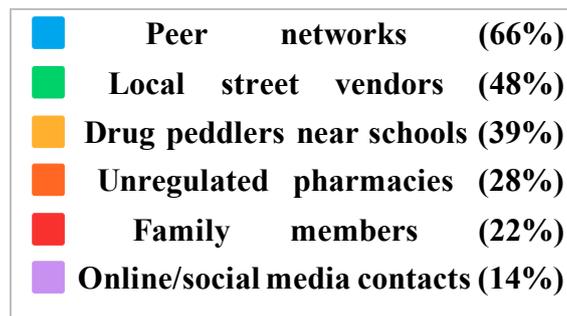
Table 3: Reported Sources of Drugs to Students

SOURCE	REPORTED (%)
PEER NETWORKS	66
LOCAL STREET VENDORS	48
FAMILY MEMBERS	22
ONLINE/SOCIAL MEDIA CONTACTS	14
DRUG PEDDLERS NEAR SCHOOLS	39
UNREGULATED PHARMACIES	28

Source: Field Survey, 2025.

Displayed as a multiple-response proportion table. Table 3 below shows the major sources of drugs reported by respondents. Peer networks (66%), local street vendors (48%), drug peddlers near schools (39%), unregulated pharmacies (28%), family members (22%), online/social contacts (14%).

Figure 2: Reported Sources of Drugs to Students (Pie chart)



Source: Field Survey, 2025.

A pie chart visualizing the distribution representation as displayed above.

5.4 Effectiveness of Interventions

Respondents identified **counselling and psychosocial support services (52%)**, **Social Studies–integrated prevention curricula (46%)**, and **extracurricular engagement (44%)** as the most effective interventions.

Table 4: Perceived Effectiveness of Educational Interventions

Intervention	Very Effective (%)	Somewhat Effective (%)	Not Effective (%)
Social Studies–based prevention curriculum	46	39	15
Counselling and psychosocial support	52	36	12
Parental engagement and training	40	45	15
Community policing/restricting supply	38	42	20
Extracurricular engagement (sports/clubs)	44	40	16
Mental health screening and referral	35	48	17

Source: Field Survey, 2025.

As displayed above; top-rated interventions were counselling and psychosocial support (52% rated very effective), school-based prevention curriculum integrated with Social Studies (46% rated very effective), extracurricular engagement 44% very effective.)

6. Qualitative Themes (from FGDs)

The three major themes that emerged during the focused group discussions (FGD) are:

- i. **Normalization via peers:** Students described initiation through close friends and social settings where experimentation is normalized.
- ii. **Curriculum gaps:** Teachers expressed that current curricula do not sufficiently integrate prevention; Social Studies contains relevant content but lacks applied, skills-based modules.
- iii. **Need for a whole-school approach:** Participants emphasized the need for counselling services, parental involvement, extracurricular engagement, and community partnerships alongside curriculum content.

7. Discussion

The findings suggest a multi-causal picture: social, familial, and structural factors combine to create a risk environment. High perception of peer influence and availability points to the need for both demand-side interventions (education, counselling, life skills) and supply-side measures (community policing, regulation of pharmacies and vendors). The prominent role that respondents ascribed to school-based prevention supports the argument for infusing Social Studies with active

prevention modules = for example, role-plays about peer pressure, civic projects on community health, and lessons linking civic responsibility to personal choices.

Teachers rated counselling and psychosocial support highly; coupling these services with Social Studies activities (debates, community mapping, service learning) can enhance both prevention and civic competence. Importantly, Social Studies offers moral and civic lenses through which students can examine substance abuse as a societal issue and a violation of community wellbeing, thereby reframing prevention beyond fear-based messages.

The findings reveal that substance abuse among students stems from social, familial, and institutional factors. Consistent with Hawkins et al. (1992), peer influence remains a dominant driver. The accessibility of substance near schools underscores systemic regulatory weaknesses.

Respondents strongly supported the integration of prevention content into Social Studies Education, affirming earlier assertions by Ochoa (2018) that educational interventions yield positive behavioural outcomes. The perceived effectiveness of counselling and psychosocial support services aligns with the view of Durlak et al. (2011), who found that social-emotional learning programs significantly reduce risky behaviours.

Thus, a combined approach curriculum integration, counselling, parental engagement, and community partnerships is essential for sustainable impact.

8. Conclusion

Education, when properly harnessed, serves as a powerful tool in combating substance abuse among students. Social Studies Education provides the moral and civic foundation for promoting healthy choices and fostering responsible citizenship. Schools that integrate substance -prevention content within Social Studies curricula and support it with counseling and extracurricular engagement can significantly reduce substance abuse prevalence.

In addition, education when reconceptualized to include life skills, mental-health literacy, and participatory civic activities can significantly reduce vulnerability to substance abuse. Social Studies Education is especially well-positioned for this role because of its focus on citizenship, ethics, and social institutions.

9. Recommendations (Policy and Pedagogy)

- i. **Curriculum Integration Reform:** Revise Social Studies syllabi to include a mandatory, skills-based module on substance misuse prevention, mental-health literacy, and peer-support strategies. Embed comprehensive substance -education content in Social Studies syllabi.
- ii. **Teacher Training:** Provide in-service training on interactive pedagogies (role-play, restorative circles, peer education) and early identification of at-risk students. Build educators' capacity in psychosocial counselling and preventive pedagogy.

- iii. **School Counselling Services:** Fund and scale counselling and psychosocial services, and integrate referral pathways with local health services.
- iv. **Parental Engagement Programs:** Run regular parent workshops on monitoring, communication skills, and supportive discipline. Introduce family life and communication programs in school community outreach.
- v. **School Counselling:** Institutionalize counselling units with trained professionals in all schools.
- vi. **Community Partnerships and Supply Reduction:** Coordinate with local authorities to minimize street-level availability of substances around schools (regulated pharmacy oversight, targeted policing).
- vii. **Monitoring and Evaluation Mechanism:** Create a data-based evaluation system to track and implement simple indicators for schools to monitor prevalence and prevention outcomes (annual confidential student surveys; referral counts; participation in extracurricular programs).
- viii. **Student Voice and Peer Programs:** Engage students in peer-education programs that leverage Social Studies topics (e.g., civic duties, social responsibility) to promote peer leadership against substance use.

10. Limitations

- i. Data presented were aggregated from a cross-sectional survey and (Focused Group Discussions) FGDs in a particular sampling frame; results are perceptual and not clinical prevalence estimates.
- ii. Self-report data on substance use may underestimate true prevalence due to stigma.
- iii. The empirical tables here are illustrative from an aggregated dataset; full-scale implementation should use larger representative samples.

11. Implications for Future Research

Future studies should include longitudinal tracking to assess the impact of Social Studies integrated prevention programs on actual substance use trajectories and academic outcomes. Experimental designs (e.g., cluster RCTs) that pilot curricular modules with appropriate controls would yield stronger causal evidence.

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Data availability

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