

BNU's Counselling Centre has been instrumental in promoting a drug-free campus. I had hardly imagined such success when I set up this Center years ago. I am also extremely proud of our psychology students who have supported the SUCP through peer engagement. Other educational institutions across the country would undoubtedly benefit from our experience.

**Dr. Ruhi Khalid, Director,  
BNU Institute of Psychology**

Addressing substance use within universities reinforces the role of educational institutions as key stakeholders in national well-being. BNU's SUCP is an encouraging example of institutional responsibility aligned with a national priority aimed at creating meaningful social and public health impact.

**Nadeem Mahbub, Secretary, Ministry  
of Federal Education & Professional  
Training, Government of Pakistan**

BNU's fight against drugs reflects a forward-thinking model for safer and more responsible campuses in Punjab. It offers a structured pathway that emulates standardized approaches to student safety and well-being in higher education.

**Dr. Iqrar Ahmad Khan,  
Chairman, Punjab Higher  
Education Commission**

BNU's SUCP is a commendable step toward safeguarding our youth through a structured and compassionate intervention. It shows what strong leadership can do and sets a forward-looking example for all educational institutions in Punjab.

**Rana Sikandar Hayat,  
Minister for Education,  
Government of Punjab**

I truly commend BNU's proactive steps to ensure a safe and healthy environment. It is our collective moral and official responsibility to protect our youth from the harmful effects of substance abuse. Only through such conviction will our campuses remain places of knowledge, discipline, creativity, and positive growth for future generations.

**Dr. Niaz Ahmad Akhtar,  
Chairman,  
Higher Education Commission**

As a partner in BNU's efforts to curb the use of drugs, ANF was heartened to see the university's commitment to this noble cause. The university's SUCP reflects a preventive framework that complements national anti-narcotics efforts. ANF supports such collaborative approaches and recognizes that BNU has set an example for other educational institutions to follow.

**Brig. Sikandar Hayat Choudhary,  
Regional Directorate Commander,  
Punjab, Anti Narcotics Force, Pakistan**

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FROM RISK TO RESILIENCE: BNU SUBSTANCE USE CONTROL PROGRAM



# FROM RISK TO RESILIENCE:

## BNU Substance Use Control Program

(A GUIDE TO CREATING A DRUG-FREE UNIVERSITY CAMPUS IN PAKISTAN)

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**FROM RISK  
TO RESILIENCE:**  
BNU SUBSTANCE USE  
CONTROL PROGRAM

(A GUIDE TO CREATING A DRUG-FREE  
UNIVERSITY CAMPUS IN PAKISTAN)

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Designed by **Kashmala Khan**

*To every community working towards a world where stigma is replaced with understanding. To those struggling with addiction, may this be a reminder that change is possible.*

# CONTENTS

List of Figures, Tables & Boxes  
List of Acronyms  
Vice Chancellor's Message  
Preface  
Executive Summary

iii  
iv  
v  
vii  
ix

## 1. Introduction

1

## 2. BNU's Journey to a Drug-Free Campus

7

### 2.1 BNU's Setting

8

### 2.2 Key Characteristics Making BNU a Good Test Case

8-12

#### 2.2.1 Geography

#### 2.2.2 Pedagogical Ethos

#### 2.2.3 A Culture of Casual Experimentation

#### 2.2.4 The Taboo Against Help-Seeking

## 3. Designing the BNU Substance Use Control Program

13

### 3.1 Leadership's Commitment and Messaging

16-18

### 3.2 Program Governance

19

## 4. BNU's Approach

21

### 4.1 Empathy & Support

23-37

#### 4.1.1 Reprieve for Help-Seekers

#### 4.1.2 The Psychological Scaffolding of the SUCP

#### 4.1.3 Individual and Group Counseling Sessions

#### 4.1.4 Promoting Early Detection and Self-Awareness

#### 4.1.5 Broader Peer Support

#### 4.1.6 Families as Allies in Change

#### 4.1.7 External Referrals

#### 4.1.8 Dealing with Crisis Situations

#### 4.1.9 Sustaining Student Journeys to Drug-Free Behavior

### 4.2 Constructive Outlets

38-41

#### 4.2.1 Revitalizing Co-Curricular Life at BNU: Societies and Sports

#### 4.2.2 Curating Social Events without a Compromising Culture

#### 4.2.3 Coping with Academic Pressure

### 4.3 Enforcement

42-54

#### 4.3.1 Mapping the Drug Ecosystem and Identifying Suspects

#### 4.3.2 On-Campus Controls and Visible Deterrence

#### 4.3.3 Off-Campus Disruption

## 5. Confidentiality

55-58

## 6. Key Takeaways from BNU's SUCP Experience

59-68

## 7. Next Steps

69-74

## 8. Adopting BNU's Model at Other Universities

75-80

## 9. Conclusion

81-82

## Bibliography

83-84

## Annex

85-98

## About the Authors

99

# LIST OF FIGURES, TABLES & BOXES

## Figures

**Figure 1** – Frequently Used Substances

**Figure 2** – Pre-Action Phase

**Figure 3** – The Pillars of BNU's SUCP: A Transformational Triad

**Figure 4** – The Drug Supply Chain

**Figure 5** – Tips for a Smooth Random Drug Screening Set Up on Campus

## Tables

**Table 1** – Ingredients of Success of the SUCP's Empathy Framework

**Table 2** – Progression of SUCP Components Over Time

**Table 3** – Key Ingredients of SUCP's Three Pillars

## Boxes

**Box 1** – Implementing a SUCP

**Box 2** – Factors Influencing Substance Use among Students

**Box 3** – Importance of Early Institutional Assessment

**Box 4** – Student Segmentation for the SUCP

**Box 5** – Screening and Assessment Tools Used

# LIST OF ACRONYMS

**ADHD** – Attention Deficit Hyperactivity Disorder

**ANF** – Anti Narcotics Force

**BNU** – Beaconhouse National University

**Brief-COPE** – Brief Coping Orientation to Problems Experienced

**CBD** – Cannabidiol

**CBT** – Cognitive Behavioral Therapy

**CCPW** – Center for Counseling and Psychological Well-being

**CCTV** – Closed Circuit Television

**CMS** – Campus Management System

**CRT** – Crisis Response Team

**DAST** – Drug Abuse Screening Test

**DASS-21** – Depression, Anxiety and Stress Scale

**ICUDDR** – International Consortium of Universities for Drug Demand Reduction

**ISSUP** – International Society of Substance Use Professionals

**MI** – Motivational Interviewing

**REBT** – Rational Emotive Behavioral Therapy

**RFID** – Radio-Frequency Identification

**SUCP** – Substance Use Control Program

**THC** – Tetrahydrocannabinol

**WHOQOL** – World Health Organization Quality of Life

**WWF** – World Wildlife Fund

# VICE CHANCELLOR'S MESSAGE

When one takes up the responsibility of heading a university, one commits to doing whatever it takes to impart the best education possible to the upcoming generation. In doing so, university leaders typically tend to focus on the classroom, learning outcomes, and student achievements. Too often, the larger picture – a picture that entails creating a broader enabling environment in which the entire university community can thrive – does not receive the requisite attention.

All universities have a responsibility to think and act beyond the classroom. We must strive to be societal partners in ensuring positive outcomes that touch student lives in ways far more consequential than mere classroom instruction. We must be in the business of creating true social impact.

From Risk to Resilience: BNU's Substance Use Control Program is a tale, not of a project, but of the collective passion of a university community to influence thousands of individual and family lives through empathy and support. It is meant to be a reminder of the ills that beset our society, the challenges our students struggle and cope with, and our responsibility to help them address the menace of substance use on campuses. Most of all, it highlights that with sincerity, determination, and perseverance, we can successfully reverse courses that derail promising young lives — lives whose destiny must be to serve the world as responsible, healthy global citizens.

We have put together this document in the hope that our peer institutions will take up this challenge in earnest. While I am certain that many other universities have already invested in this noble cause, to our knowledge, no Pakistani university's experience has been documented formally. A void therefore exists in terms of providing university leaders in Pakistan who are yet to pursue this path with a starting point. I hope my fellow vice chancellors find this contribution to be useful in this regard.

Hardly any other publication can give an institutional leader more satisfaction than this one brings to me. While tackling substance use is a never-ending process, Beaconhouse National University's (BNU) experience thus far has been extremely fulfilling. None of it would have been possible without the support of my BNU colleagues. While the co-authors of this document spearheaded the effort, each and every member of the BNU community deserves my appreciation and gratitude for buying into the effort and supporting it. BNU also owes its utmost respect to the professionalism of the Anti-Narcotics Force (ANF), the police, and multiple other government law enforcement agencies for their dedicated facilitation. Without their support, the outcomes would have left far more to be desired. Most of all, I am grateful to our students who showed courage and character to join the Substance Use Control Program (SUCP) and their families, who trusted the university to assist them in their recovery.

I also wish to thank Manahil Fatima for working with us to copy-edit the document, and Kashmala Khan for the publication design and producing it in its final form.

On behalf of BNU, I offer our support to all peer institutions interested in benefiting from our experience. Together, we can achieve anything we put our hearts and minds to!

**Moeed Yusuf**

Vice Chancellor - BNU

# PREFACE

Sometimes, in our careers, we find ourselves in moments that leave an indelible mark within us that is profoundly human. Such moments stir a calling that is born out of observation, concern, and a persistent belief in reforming lives.

Substance use is one such reality. It is a crisis that pierces through general well-being, academic prosperity, and the integrity of the learning culture in educational institutions. This challenge has been haunting academia globally for many years. In Pakistan, with its widely-discussed youth bulge, the challenge is especially pertinent and consequential.

At BNU, we decided to confront this challenge head-on rather than hiding behind cultural taboos that often prevent and silence meaningful dialogue and action. What began as an urgent and necessary response to a crisis soon transformed into a deeper commitment — a pledge to understand and address the substance use problem with compassion, strategy, and community involvement.

Initiated in late-2023, the success of BNU's SUCP is owed to the support and tireless dedication of the university. This initiative was spearheaded by the university's leadership, the Center for Counseling and Psychological Well-being (CCPW), and the administration department, with critical facilitation from all academic and several support departments, and, importantly, from our student body. The university management also owes gratitude to the Board of Directors, who unequivocally backed the management's resolve to pursue this sensitive but critical agenda.

BNU's efforts received international recognition. The university was nominated as a finalist in the "Outstanding Support for Students" category of the Times Higher Education Awards Asia, 2025. This recognition reinforced our belief that educational institutions like BNU can and must lead social change. Even this, however, is dwarfed by the validation of our effort provided by those courageous BNU students who chose to depart from the destructive path of

substance use and joined the SUCP to reform themselves. It is their stories of success and gratitude for the support offered by the university that make this entire effort truly worthwhile. We wish to thank all of them for reaching out for help, cooperating with the administration, supporting their peers through hard times, and becoming our ambassadors of hope. Without their willingness and trust they placed both in the process and the people behind it, we would not have been able to persist with our efforts, let alone succeed in them.

As a non-profit institution that prioritizes responsible citizenship over merely granting degrees to students, we feel it is our responsibility not only to set best practice examples but also to share these with others to emulate. As the SUCP's early results began to show promise, our focus expanded to creating an intervention model that can be adopted by peer institutions in Pakistan. We are producing this book in that stead. It seeks to provide a thorough and candid insight into BNU's strategies and challenges in ensuring a drug-free campus ecosystem so that other universities may have a reasonable foundation to build upon.

We hope that this book will invite you to believe in change through bold action and determination and offer a reflection on what other institutions could do to achieve similar outcomes.

# EXECUTIVE SUMMARY

Beaconhouse National University's (BNU) Substance Use Control Program (SUCP) was designed to rid the campus of drugs by replacing denial, stigma, and fragmented responses with a whole-of-university approach grounded in student well-being, legal compliance, and institutional accountability. The university formally declared itself a drug-free campus in 2025. This document presents BNU's experience as both an intervention model and a practical starting point for other universities confronting substance use on campus. We hope that our findings will offer valuable learning that peer institutions can adapt to their specific campus context and dynamics.

Substance use is not an isolated institutional problem but a broader campus culture affecting universities around the world. Educational institutions have a responsibility to provide an environment where every student is physically safe, psychologically secure, and suitably empowered. The goal must remain to build a responsive institutional architecture focused on prevention, early detection, timely intervention, rehabilitation, and sustained commitment against substance use.

BNU's experience highlights three prerequisites.

**1. Total and unequivocal commitment** from the institutional leadership to see the initiative through to its logical conclusion. Without direct involvement and buy in from the university's top management, the initiative is unlikely to deliver.

**2. The approach to substance use** must be grounded in a commitment to student well-being. Universities must recognize that substance use is not as much about wrongdoing or pleasure as it is a maladaptive coping mechanism in response to stress, trauma, or social dislocation. Treating such behavior as a moral failure not only undermines recovery but entrenches stigma and silence. BNU steered clear of moral policing, instead emphasizing that substance use is illegal, harmful to student well-being, and incompatible with the university's obligation to provide a safe and healthy environment.

**3. A thorough institutional assessment** to gain an accurate understanding of the dynamics of substance use on campus and its associated off-campus context proved necessary to target program interventions correctly. The assessment was needed not only to identify use and supply patterns, but also the deeper drivers of substance use, including mental health struggles, peer dynamics, stigma, institutional blind spots, and social normalization. The process may seem difficult, but it is essential for practical and purposeful action.

The three pillars of the SUCP:

The SUCP rests on three interdependent pillars: empathy and support; constructive outlets; and enforcement. Success depends on these pillars working in tandem, aligned to produce the right balance among them. The intensity of efforts to ensure empathy and support and the availability of constructive outlets remains high throughout the life of the SUCP while enforcement measures taper off and operate in the background after the initial phase where visible interventions are necessary to create strong deterrence against substance use.

**1. Empathy** leads the way by changing the narrative from "don't use drugs" to "we are here to support you if you are struggling." It must include amnesty-based or reprieve-oriented pathways for early help-seeking. The effort focuses on confidential and trauma-informed counseling, individualized recovery plans, professional psychological scaffolding, external referrals when necessary, and broader stakeholder support, especially peers and families, where appropriate. It promotes early detection, self-awareness, and the university community's capacity-building through awareness, training, and supportive protocols.

**2. Constructive outlets** for students reinforce empathy-led interventions by offering them opportunities to channel their time, energy, stress, and creativity into healthier alternatives. BNU expanded societies, clubs, sports, evening campus life, curated social events, peer mentorship, academic support, innovation, and creative platforms. Students were also empowered through two-way communication, which allowed them to reach the top management directly to raise any concerns. These outlets helped reduce idle exposure to risk while offering legitimate relief from academic, emotional, and social pressure.

**3. Strict enforcement** mechanisms are also necessary but they must support – not lead – the wider effort. Enforcement must be predictable, dignified, transparent, and proactive and aimed more at deterrence than punishment. It includes targeted interventions based on use and supply patterns, layered vigilance, visible deterrence-oriented actions where necessary, random drug screening for early detection, and a clear distinction between users who need care and peddlers who require sanctions. Enforcement cannot be complete without extending the SUCP’s jurisdiction to off-campus locales and dynamics that directly effect on-campus substance use. Coordination with law enforcement agencies proved consequential in effective off-campus enforcement.

### Empathy & Support

**Core idea:** Treat substance use as a health and well-being issue, not a moral failure.

- Amnesty-based pathways for early help-seeking
- Confidential, trauma-informed counselling embedded institutionally
- Individualized recovery plans (not one-size-fits-all sanctions)
- Family involvement as recovery support, not enforcement
- Professional mental-health scaffolding guiding decisions

### Constructive Outlets

**Core idea:** Reduce risk by filling time with purpose, connection, and agency.

- Expanded societies, clubs, and inter-school engagement
- Evening campus life through sports, fitness, and recreation
- Curated social events with cultural value and safety controls
- Peer mentorship and academic support during high-stress periods
- Innovation, entrepreneurship, and creative platforms.
- Direct student voice via direct access to leadership

### Enforcement

**Core idea:** Create credible boundaries without humiliation or fear.

- Zero-tolerance policy, consistently and visibly enforced Layered campus vigilance (surveillance, patrols, access control)
- Random drug screening for early detection, not punishment
- Clear separation between users (care) and peddlers (sanctions)
- Targeted collaboration with law enforcement to disrupt supply
- Transparent disciplinary process with institutional memory

To be sure, BNU's experience can only offer a guide, not a model, for blind replication. There is no one-size-fits-all solution: across SUCP's three pillars, peer institutions will need to adapt the program, including considering individualized approaches for different segments of the student population. Universities significantly larger in size than BNU's may need to consider the following:

- **Sufficient counselling capacity:** Plan sufficient counseling capacity aligned with the scale of the problem.
- **Communication and student empowerment:** Strategic communication about the intent and objectives of the SUCP is a crucial aspect of the initiative. While the objective and intensity of communication by any university could mimic BNU's, the content and approach will have to suit every university's unique culture and context. Meanwhile, student empowerment must be ensured by offering students formal mechanisms of being heard.
- **Confidentiality:** At every stage, confidentiality must be treated as non-negotiable. Privacy is central to trust, help-seeking, and program legitimacy. A breach of confidentiality risks collapsing the entire model.
- **Target the institutional center of gravity first:** Large universities should begin with a structured diagnostic to identify high-impact physical clusters and student segments where intervention will generate the strongest multiplier effect. They may need to divide their campus into priority clusters (e.g., high-risk hostels, departments, or incoming cohorts), and create parallel teams that sequence and scale interventions accordingly. Adequate financial resources: Even though financial resources did not stand out as a make or break for our effort, universities must undertake a realistic cost analysis to support the SUCP with adequate budgets for the duration of the program.
- **Support from government entities:** Substance-use control on campuses has risen in government priority in recent years. Universities should not shy away from engaging with government regulators and law enforcement agencies to implement a successful SUCP, including taking necessary off-campus measures.

Substance use is a pervasive and growing challenge across higher education institutions globally. It undermines student well-being, weakens academic

environments, and distorts campus culture. Addressing substance use is not an optional intervention; it is a core institutional obligation of universities. With the right approach, it is neither as complex nor as unattainable as often assumed.

Success ultimately depends on aligning leadership commitment, institutional systems, and community trust in a coordinated and sustained manner. With clarity of purpose, structured design, and consistent execution, there is no reason why universities cannot meaningfully address substance use to create safer, healthier, and more resilient campus environments.

### **Box 1: Implementing a SUCP**

**Commit:** Ensure full leadership commitment and ownership of the SUCP. Leadership to publicly communicate commitment and determination to see SUCP through to its logical conclusion

**Strategize:** Create a small core team, including the Vice Chancellor, to spearhead the SUCP

**Research:** Conduct research and data-based institutional assessment of substance use dynamics encompassing the on- and off-campus context and plan professional psychological support, financial resources, and enforcement capacity accordingly

**Implement:** Pursue the three pillars of the SUCP in all their dimensions, leading with empathy and support but maintaining the right balance among them in line with the particular university's context

**Stay the course:** Continue to adapt and treat SUCP as a perpetual process

# INTRODUCTION

Higher education institutes are envisioned as an abode of transformation and growth where young adults refine identities, develop critical thinking skills, and prepare for professional civic life. Yet, the transition from a highly structured school environment to the relative autonomy a university offers is rarely seamless. The increased freedom and empowerment, academic pressure, social experimentation, individual decision making, and emotional upheaval make for a challenging transition, being both opportune and vulnerable in nature. For most students, this transition unfolds through healthy exploration and growth. For others, however, newly acquired freedom and excitement give way to silent struggles, maladaptive coping strategies, and decisions made in pursuit of relief, belonging, or escape. Within university settings, where peer influence is strong and social reinforcement is powerful, experimentation can easily intersect with risk — particularly when support systems are unclear and stigma discourages help-seeking.

At universities, students can spend a lot of time with peer groups, sometimes mingling with those who valorize the consumption of drugs. Influence in these environments extends beyond simple observation or imitation; behavior is often reinforced through social praise, inclusion, or acceptance. Conversely, experiences of rejection, bullying, or exclusion can further weaken coping mechanisms and heighten vulnerability. In this context, substance use is less an act of rebellion and more a response to stress, disconnection, or the desire to belong.

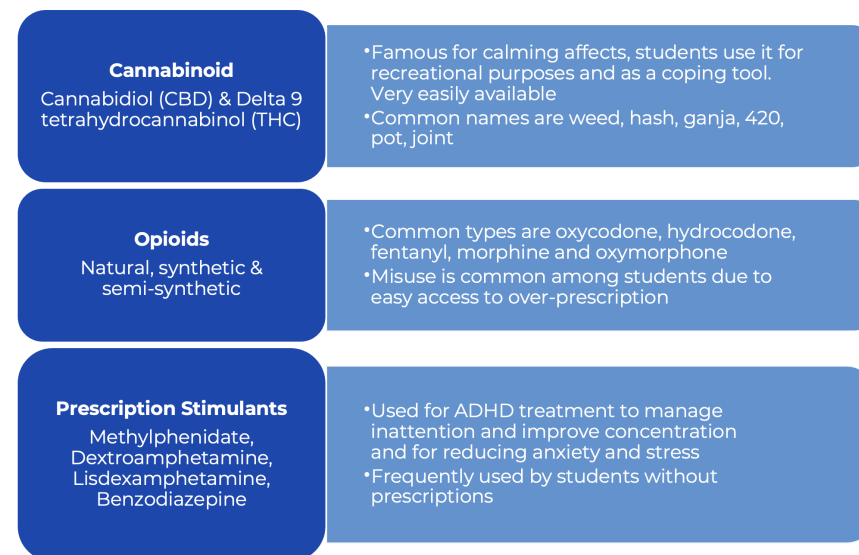
In recent years, substance use has undergone a subtle process of normalization. It is becoming a part of chat group jokes, is glamorized on mass and social media, and is gaining acceptance as a 'personal choice' of anyone who falls prey to this canker. Students often mistake it as destigmatization, which is crucial for breaking barriers surrounding help-seeking and having open conversations. It is actually stirring and strengthening an air of desensitization to substance use, which numbs any sense of urgency to address it.

Indeed, substance use among university students is widely recognized as a serious global health issue. Evidence from Pakistan gathered over the past decade is alarming. According to Chaudhry et al. (2022), 68 percent of university students use substance either daily or at least frequently. A survey presented in the Senate Standing Committee on Interior by the South Asian Strategic Stability Institute claimed that 53 percent of the students of elite private sector educational institutes use illicit drugs (Abbasi, 2016). Yet another

study put the number at 44 percent. The findings of this study also suggest that male students and hostelites use drugs more frequently as compared to their female and non-hostelite peers (Sajid et al., 2020). A study focused on Islamabad and Rawalpindi, however, revealed the daily and weekly drug use for males and females to be roughly the same. Almost half of the students disclosed they were using drugs before they turned 18 (Usman et al., 2017). A study carried out in Faisalabad found that 59 percent of the respondents initiated the use of substances between 17-23 years of age (Salik, M. H. et al., 2004). Ahmad et al. (2020) point to non-existent or weak strategies to address the menace as the reason for an increase in drug consumption among university students.

Cannabis (weed) is the most commonly used substance followed by opioids (Chaudary et al., 2022). Hard drugs like cocaine and heroin are less common than cannabis, ecstasy pills, alcohol and sedatives like benzodiazepines. Vaping and other designer drugs make the situation even more worrisome. The drug mafia is marketing synthetic substances as stress relievers and cognitive enhancers to lure students who are anxiously looking for productivity increase or escape. In an International Society of Substance Use Professionals (ISSUP) study focused on Islamabad, 75 percent of the participants disclosed that they could easily gain access to almost all kinds of illicit substances within a radius of one kilometer from their academic institute (Akram, 2024). A study by Khan et al. (2020) also confirmed the ease of access to drugs, including through on-line deliveries.

Figure 1: Frequently Used Substances



Universities have a responsibility to provide safe and welcoming environments. Without a safe and healthy culture, academic and co-curricular excellence are bound to remain elusive. Safety is not only about physical boundaries. Mental health should be as much of a – if not a bigger – concern for university-going students. Unfortunately, such issues remain deeply stigmatized in our society. We tend to approach substance use as something done by a ‘bad’ person rather than as a maladaptive coping strategy. The persistence of a powerful taboo that suppresses open acknowledgement of the problem results in fragmented, rare, and superficial institutional responses. Most universities operate on reactive models; collective, proactive action across universities, or indeed the society, remains absent. Therefore, conditions that are common, treatable, and often transient during young adulthood are frequently ignored until they escalate into destructive behaviors. For any hope of positive change, substance use must be recognized not as an isolated problem affecting a handful of institutions, but as a broader issue of campus culture that risks the future of our young generation.

## **Box 2: Factors Influencing Substance Use among Students**

The factors influencing substance use highlighted below do not operate in isolation, nor do they neatly predict substance use behavior. However, they are the most commonly identified. Effective intervention requires a nuanced, multi-causal understanding rather than reliance on single-factor explanations.

- Biological and social transition is fast and fiercer because the brain goes through major rewiring at the age most undergraduate students enter university. During these years, the pre-frontal cortex, which is responsible for decision making and critical thinking, is moving towards its full maturity, causing high activity and sensitivity in this region. This biological process can cause risk-taking behaviors in young adults. Students resonate more with peer experiences than maturer individuals in the university community. In many cases, being away from the family, new social connections, peer pressure, freedom to explore, and strong impulse for pleasure-seeking sets the stage for bending rules and changing norms revolving around substance use.
- Mental health struggles are often shunned and mischaracterized to avoid confronting the problem, which makes them go untreated for prolonged periods, often causing students to self-medicate or use substances to feel better. The stigma surrounding help-seeking and getting exposed compromises the chances of preventing or resolving the issue in time. Moreover, when mental health concerns are kept isolated from academic decisions within the university rather than integrating this aspect into the routine academic life of students, their vulnerability increases.
- Unrealistic expectations by parents and academic institutions to 'figure it all out' and excel can be overwhelming for students, especially when they are struggling to form their individual identity as adults. The intense institutional and family pressure can lead to a sense of inadequacy, stress, and anxiety, ultimately causing them to indulge in substance use as a coping mechanism. Punitive measures to handle

substance use make students lean towards hiding the problem rather than seeking help. Feeling vulnerable to confidentiality breaches, they often choose to jeopardize their well-being instead.

- Digital addiction and detachment have created an incongruous situation. Students are over-connected and obsessed with whatever is going on socially but are getting increasingly lonely in real life. This scenario creates more room for drugs to bring a sense of fulfillment and excitement in their lives. Mass media glamorization of drugs and alcohol is leading young minds to see it as a source of fun, thrill and gaining power without consequences. This portrayal has blurred the lines between reality and entertainment and has helped normalize substance use.
- Financial burden and reputational issues can make the process arduous. Pursuing education, especially in the private sector, can become burdensome. In some cases, financial inadequacies can push students towards substances, not only as users but also as drug peddlers to sustain themselves financially (Bennett & Holloway, 2019).

# BNU'S JOURNEY TO A DRUG-FREE CAMPUS

## 2.

### 2.1 BNU's Setting

Even though the scale of substance use at BNU was not much different than that in several other peer institutions, BNU was a particularly relevant test case for a Substance Use Control Program (SUCP). The university is famous for its sterling academic programs, a breathtakingly beautiful campus, and a progressive approach towards educational and societal challenges. At the same time, BNU was perceived to have a 'party culture'. It was unfairly seen as an institute that provides a drug-friendly environment. That was not so. But like any other higher education institution, it was not altogether immune to the deeply troubling issue of substance use among students. A miniscule proportion of the student body was involved in substance use, and an even smaller cohort in its distribution. Cannabis, prescribed stimulants and sedatives were the most frequently used substances. Cannabis functioned as their primary 'drug of choice' for many students, either used alone or in combination with other substances.

### 2.2 Key Characteristics Making BNU a Good Test Case

#### 2.2.1 Geography

BNU's location contributed to both access and enforcement challenges. The campus is situated in Tarogil, a part of Lahore that has developed relatively recently and whose immediate surroundings have not always been prioritized in terms of municipal and law enforcement presence. This semi-peripheral setting, combined with nearby residential options – private hostels, rented portions, and single-unit housing – beyond university jurisdiction created 'risk zones' where substance use and distribution could occur outside institutional oversight. The campus's proximity to adjacent residential areas, including Tarogil Village, also affected supply dynamics. Individuals involved in substance use or distribution could operate in nearby spaces with limited scrutiny while maintaining easy access to the campus and its social life. Commercial and social venues located outside BNU's administrative jurisdiction functioned as informal buffer zones, enabling unsupervised gatherings and, in some cases, easier access to delivery-based supply.

BNU's own physical layout also created practical oversight challenges. Large open green areas, semi-secluded corridors, and peripheral sections near the hostels provided spaces where discreet use was easier and detection became harder. Over time, this contributed to a culture in which a tiny minority felt

able to use substances with relative openness, even as BNU continued to deliver academic excellence. These factors did not cause substance use, but they shaped where and how it occurred, and therefore informed what effective intervention on the university's part would require.

### **2.2.2 Pedagogical Ethos**

BNU takes pride in its liberal arts ethos. It espouses a progressive and free-thinking approach and encourages open discourse, often with an artistic expression of social conventions. This provides an air of whole-hearted acceptance and a nurturing space to young minds that are eager to foster their creativity, intellectual curiosity, and individuality without rigid barriers. While empowering, the ethos comes with subtle vulnerabilities, which if not addressed, can create greater risks. At BNU, the broad leeway for non-conformity and self-expression was inadvertently portrayed as limitless autonomy and absence of restrictive norms. Masked as freedom of choice, some behaviors, including substance use, made it harder to enforce regulatory measures without appearing authoritarian. The university management had struggled to address this sensitive issue without being perceived as stepping on personal freedoms. The resulting approach to downplay the problem put vulnerable students, especially those who were not experimenting or enjoying substance use but were trapped and unable to escape the predicament, at risk. BNU's SUCP therefore needed to be navigated with caution, strengthening a sense of care and accountability while protecting the spirit of freedom. The university had to ensure this balancing act throughout.

### **2.2.3 A Culture of Casual Experimentation**

BNU's impression as a 'party university' contributed significantly to normalizing substance use among some groups of students who considered it a marker of social belonging. Some of them were sharing their experiences with alcohol and other illicit substances, which they experimented with in their private settings, on their social media accounts. Few groups normalized casual recreational use, treating it as part of weekend leisure. This amplified the difficulty in raising awareness about how casual experimentation with drugs can lead to toxic dependency. In some departmental settings, particularly where academic competition was intense, stimulant use was framed by some students as a functional tool to enhance productivity and manage deadlines. Less visible, but equally important, were 'quiet users': students who self-medicated in isolation to cope with depression, chronic stress, family

abuse and difficulties, or relationship challenges. Often reliant on prescribed or non-prescribed medications, these students rarely drew attention to themselves, making their struggles hardest to detect. An effective SUCP therefore had to address the full spectrum of use patterns – social, functional, and psychological – rather than treating substance use as a single, uniform behavior. Since some members of the BNU community took the management's proactive approach as an intrusion and violation of their personal space and freedom, the prevailing culture made it difficult to convince students that the university's intervention was solely meant to benefit them. The most skeptical also did not believe in our conviction to achieve irreversible transformation. Their natural inclination was to play for time till the management tires out.

### **2.2.4 The Taboo Against Help-Seeking**

The deep-rooted stigma attached to substance use was one of the most pervasive hurdles. Most of the users were reluctant to seek help. Despite BNU's open culture, the university management had never tested how far the students would trust the administration in opening up about drug use. As we went down this path, we realized that students feared punitive actions and being judged by their peers, faculty, or other members of the BNU community. This incubated an environment of denial, resistance, and secrecy among students. Even many staff members and faculty were skeptical about reporting their concerns, often out of the fear of backlash for causing reputational damage to the institution. In this context, destigmatizing became a necessary step and a precondition for building trust and confidence across the entire BNU community.

“

To be honest,  
I dragged my feet on  
getting help. I was so  
afraid of being judged  
or getting in trouble  
with the university.  
But from day one, my  
counselor completely  
flipped that fear.

”

# DESIGNING THE BNU SUBSTANCE USE CONTROL PROGRAM

BNU's SUCP was initiated in December 2023. It initially began as a crisis intervention measure in response to rising concerns regarding substance use among students. However, it eventually expanded to a full-fledged program encompassing preventive education, peer and professional support, early detection, and often family counseling. This shift reflected the recognition that substance use could not be addressed effectively through isolated or reactive measures alone. The overall objective evolved not only to respond to substance use through a multidimensional framework, but also to lay the foundation for a campus culture that prioritizes mental well-being, early intervention, and shared accountability.

The program emerged out of real-time data, field observations and familial history, institutional policies, administrative structure, external alliances and professional insights into the subtle pervasiveness and impacts of substance use across the university community. A critical first step was the systematic assessment of available institutional data to establish a baseline for informed action. Historical records relating to students, staff, and faculty were reviewed to identify prevalence patterns, trends, and commonly-cited reasons for substance use, including recurring demographic and contextual factors such as age, academic department, and residential status. These records also offered insights into help-seeking behavior within the BNU community. In parallel, information was gathered from key stakeholders, including former counselors, hostel wardens, senior students, faculty members, and administrative staff. These consultations helped illuminate the intensity and nuances of substance use on campus, including psychological vulnerabilities, behavioral patterns, peer dynamics, and common strategies used to conceal use. They also revealed institutional blind spots related to security, supervision, and specific physical spaces that required targeted intervention. Faculty members and senior students added further perspective on student attitudes toward substance use, peer influence, and social media influences that glamorized drugs and alcohol.

Viewed collectively, these inputs revealed a consistent pattern of enabling factors, including normalization within the student culture, peer influence, lack of support and care from faculty and staff, ease of access, stigma surrounding help-seeking, and gaps in institutional mental health integration. These combined with deeper underlying drivers mostly linked to family dynamics and peer relationships that were reinforcing substance use and limiting effective intervention. Early assessment and engagement made clear that substance

use on campus intersected with mental health, peer dynamics, access conditions, and institutional culture. The assessment also helped highlight the subtle trends, culture, and institutional policies that impact both substance use and intervention outcomes. Through these lenses, we were not only able to identify the various causes that lead to this problem, but also the required interventions to establish a framework for a sustainable long-term solution.

SUCP was conceived as a comprehensive, multi-layered intervention that was context-specific and institutionally-grounded and aimed at addressing both the underlying vulnerabilities and visible behaviors. The program was intentionally designed to remain adaptive, allowing for additional insights to emerge through engagement and observation. We were also able to learn from international best practices courtesy of the university's membership of forums like the International Consortium of Universities for Drug Demand Reduction (ICUDDR), a global network dedicated to strengthening institutional competencies in addiction prevention, treatment, and public health across higher education institutions.

### **Box 3 : Importance of Early Institutional Assessment**

- Enabled us to start the program with real-time data and proceed with practical and purposeful efforts.
- Helped in objective monitoring and assessment of the program's impact to refine further steps.
- Highlighted the otherwise overlooked factors like culture, policies and trends that silently impact outcomes.

### **3.1 Leadership's Commitment and Messaging**

Before we could even embark on the journey to make BNU a truly drug-free campus, it was necessary to create buy-in and ownership of the program's vision within the BNU community. The university leadership had to convince students, faculty, and staff of its will and commitment to take the initiative to its logical conclusion and to accept responsibility for the challenges that came along the way. The impetus was provided by the induction of a new vice chancellor in the summer of 2023 who made this his top most priority.

There were a number of initial concerns. The most consequential – one that holds most universities around the world from pursuing this path – was the fear of reputational damage to the university. Many members of the BNU community and other well-wishers feared that the effort would become public and would directly impact the university's appeal to prospective students and their parents. BNU's leadership turned the logic on its head, choosing transparency over caution. The vice chancellor consciously initiated a communication strategy emphasizing that it was in fact the absence of the university's action against substance use that risked diminishing its appeal. He argued that BNU was performing adequately but still well below its potential, and its perception as a party campus was one of the reasons. He publicly acknowledged the problem without sensationalizing it and signaled irreversible intent to fix it. This approach eliminated ambiguity and made it clear that BNU would no longer look at substance use as a cultural quirk.

Yet, it was critical that the leadership's messaging not create unnecessary controversy, remain supportive of students, and present an irrefutable logic for the initiative. This fine balance was achieved by stressing four aspects in official communication:

- Legal (not moral) imperative: Substance use was illegal and harmful to student well-being and institutional integrity, and left the university vulnerable to law enforcement action. The administration did not have an option to ignore this aspect.
- Freedom within non-negotiable boundaries: To avoid any circular debates about freedom of choice, messaging emphasized that intellectual freedom and self-expression remained BNU's core values, but they could not override non-negotiable safety and legal boundaries. The university management insisted it was not making a moral choice or judging students with

substance use problems, but it was obligated to ensure that it provided its students a safe and healthy campus environment. It emphasized that a tiny minority had been hijacking the vast majority's comfort and safety and this was unfair to the latter.

- **Leadership and institutional backing:** The vice chancellor had taken BNU's Board of Directors into confidence and they were keen to see the university rid itself of this problem. Moreover, the vice chancellor made clear that the responsibility for any fallout lay with him, not the students, faculty, or staff supporting the transformation. This was necessary for people to feel protected while being empowered to back the process.
- **Support and credible enforcement:** Voluntary help-seeking was framed as a pathway to support through the SUCP, while only those engaged in substance use who chose to remain recalcitrant would face enforcement. This distinction reduced fear, encouraged early disclosure, and strengthened legitimacy. Moreover, recognizing that confidentiality was central to sustaining trust, the management repeatedly emphasized that privacy would be protected at all costs.

These messages were communicated through multiple, deliberately-sequenced channels, including freshmen Zero Week (orientation week) briefings that set expectations for new students, university-wide and departmental townhalls that provided space for dialogue and clarification, and regular leadership communication that reinforced institutional resolve. The vice chancellor's weekly video messages served as a consistent and visible touchpoint for students, enabling the management to reiterate priorities, address emerging concerns, and reinforce the university's commitment to student, faculty and staff well-being and institutional accountability.

In parallel, high-visibility environmental cues were used to reinforce behavioral norms and regulatory boundaries across campus. Clear 'no smoking' signage was installed in prominent locations, particularly in high-usage areas, alongside the designation of only four approved smoking zones across the entire campus. BNU had previously put no restrictions on outdoor smoking on campus. These visible measures complemented formal communication by translating policy into everyday practice, removing ambiguity, and signaling that institutional expectations were both deliberate and enforceable.

To ensure sustained access to accurate information and procedural clarity, BNU policies and the student handbook and disciplinary rules were updated and all relevant policies, reporting pathways, and student support resources were communicated. Over time, policies were uploaded to the university's SharePoint-based LMS ("Campus Management System" (CMS)) platform for students, faculty, and staff. This digital consolidation (which is still ongoing) was reinforced through periodic email circulation and updates, allowing the BNU community to remain informed, aligned, and up-to-date with institutional guidelines and available support mechanisms. Since Fall 2025, the university has also instituted an affidavit in which awareness of the zero-drug policy has to be acknowledged and signed by students. Meanwhile, an umbrella disciplinary committee was created to handle all disciplinary cases. Together, these layered communication efforts supported a cultural reset, one that balanced transparency, trust, and deterrence while embedding the SUCP within the daily functioning of the university.

Faculty and staff were kept informed and encouraged to support basic norms such as smoking restrictions and referrals of any cases they felt needed counseling support, but were not turned into front-line enforcers or informants. This reduced the risk of politicizing classrooms, protected academic relationships, and avoided placing unwilling individuals in positions to adjudicate specific cases. Where community members voluntarily shared concerns or information, these were processed while ensuring confidentiality and process safeguards.

Figure 2: Pre-Action Phase



### 3.2 Program Governance

Translating the SUCP model into practice required a clear governance structure and a team with defined authority, credibility, and institutional reach. The first concrete step was the formation of a small core team with a shared mandate. Three units proved critical to the program's success: the Vice Chancellor's Secretariat, the university administration, and the Center for Counseling and Psychological Well-being (CCPW).

The vice chancellor's ownership was explicit from the outset. The administration department's leadership brought operational depth, supported by teams with rich understanding of campus dynamics and student life. Meanwhile, a new Campus counselor was brought in to head the CCPW. While the university had previously leaned on the expertise of professional psychologists at our Institute of Psychology, one of the country's leading psychology schools, the scale and sensitivity of the new task required dedicated capacity. The university therefore appointed a practicing psychologist, a BNU alumna who brought both professional expertise and contextual familiarity to the CCPW. The ability to design and execute the SUCP was a key criterion in her appointment.

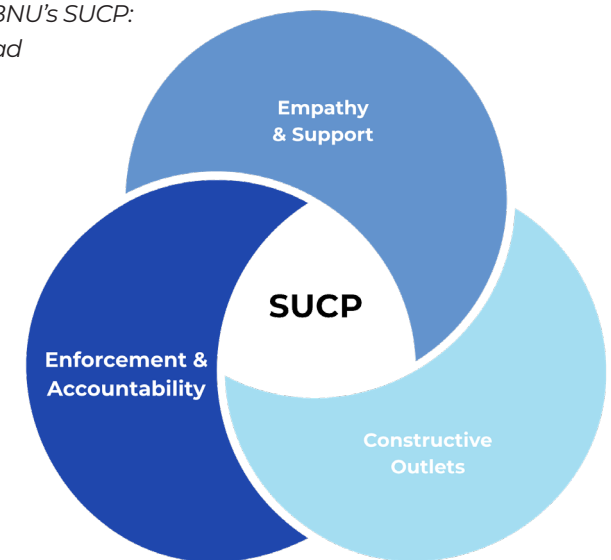
SUCP was functionally spearheaded by the Counselor and the head of administration, with constant support from multiple departments, most notably the Office of Student Affairs which was instrumental in creating constructive co-curricular avenues for students. The registrar's office, hostel wardens, heads of other administrative departments, the communications team, and the disciplinary committee were the other critical supporting arms of the initiative. This whole-of-university approach marked by cross-functional integration ensured that the SUCP was embedded institutionally rather than operating as an isolated or ad hoc intervention. At the same time, the extremely small core team meant that decision making was decisive and accountability could be effective.

# BNU'S APPROACH

Three interdependent anchors emerged as central to BNU's SUCP design: empathy and support; constructive outlets; and enforcement. These elements were not conceived as standalone pillars, but as mutually reinforcing components that operated in tandem. In fact, if we were to identify one factor that led to the SUCP's success, it would be the ability to balance these three elements to achieve real transformation while deterring harmful behaviors and maintaining the academic quality and sanctity of the institution.

From the outset, the SUCP was framed within the broader ambit of student support. Decisions were guided by the principle of maximizing protection and benefit for the greatest number of students while preserving trust, dignity, and institutional integrity. Through this approach, we wished to ensure that students felt heard, understood, and safe, and had constructive avenues to expend their energies. An empathetic outlook was meant to enable them to access help without fear and shame, recognize risk, and reflect on their choices. The expansion of constructive outlets – sports, societies, and other structured extracurricular engagement – remained a continuous priority in parallel. These were treated not as peripheral activities, but as integral components of risk reduction, resilience, and cultural renewal. At the same time, deterrence through strict enforcement of the zero-tolerance-for-drugs policy was necessary, but it was achieved without prioritizing punishment over prevention or shame over support.

*Figure 3: The Pillars of BNU's SUCP:  
A Transformational Triad*



#### 4.1 Empathy & Support

To establish a system that is effective, swift, and compassionate, BNU had to make the challenging shift from typical reactive models where intervention is limited to critical situations or substance users are removed from the campus community altogether to a preventive model that is woven into the fabric of BNU's ideology of inclusivity, empathy, and resilience.

We had to build a system our students could trust. Counseling services, peer support, mental health advocacy, student-led awareness initiatives, and a rigorously protected confidentiality framework were integrated into the everyday campus life. The narrative deliberately shifted from “don't use drugs” to “we are here to support you if you are struggling.” Creating a safe, non-judgmental space for help-seeking was foundational to this effort. Moreover, the SUCP fully acknowledged the diversity in individual experiences. It delved deep into the root causes – not only superficial behaviors – of every student's experience. Whether it was out of curiosity, financial constraints, complexities in family or peer relationships, challenges with gender identity, performance pressure, or the taboos surrounding seeking help, all the ‘whys’ and ‘hows’ of any student turning to substance use were taken into account before determining the intervention.

Rather than adopting a one-size-fits-all response, the program emphasized flexibility and individualization. This segmentation helped the SUCP remain both humane and realistic — ensuring students who wanted help could access it safely, while those endangering the wider community faced appropriate consequences. By doing so, the SUCP was able to remain responsive while preserving consistency and fairness.

“

Rather than feeling labeled or reduced to a stereotype, I felt treated with dignity and understanding.

”

#### **Box 4: Student Segmentation for the SUCP**

- Students not involved in substance use: Those who were not involved in drugs in any way were given the confidence that they will benefit from these efforts as the university becomes a clean and safe place and the institutional reputation improves further due to these actions. They were encouraged to provide peer support and identify friends who needed help.
- Students willing to seek help:
  - ▶ Students with substance-use exposure: Among these, were two groups. First, were students who come from permissive families or social environments, giving them prior exposure to substances. They were exposed to settings where alcohol and substances – especially cannabis – were normalized or accessible. This shaped their early patterns of experimentation and social influence. A second smaller subset used substances primarily for ‘fun’ or recreation, often without understanding how quickly dependency patterns may form despite infrequent use.
  - ▶ Students without past substance exposure: Many students had no prior substance exposure but entered the fray through peer dynamics. In a handful of cases, students (particularly female students) were entrapped through ‘free tests’ of substances and later pressured to pay and continue purchasing to avoid being publicly shamed or having their families informed.
  - ▶ Students who opposed intervention: Another category included students who were recalcitrant, either because they did not believe the university’s intervention was serious, or because they had direct monetary interests tied to the activity through peddling. Among this group were those who actively resisted support, requiring a clearer accountability signal and stronger boundaries. Others were not users themselves but were involved in peddling, motivated by the need for income to pay fees or meet basic needs. The most hardened sub-group was

of students who had become connected to organized suppliers and had developed a steady and lucrative income stream. In such situations, deterrence and formal enforcement became unavoidable to protect the wider campus community.

The following subsections outline how BNU’s empathy-first framework was operationalized in practice across the SUCP architecture.

#### **4.1.1 Reprieve for Help-Seekers**

A critical component of the SUCP was to offer exemption from institutional sanctions to students who voluntarily disclosed their substance use problem and wanted professional help. It provided them with a protected opportunity to access a compassionate pathway to recovery without fear of administrative penalties.

Interestingly, this step came as a surprise to students but it was also met with some reservations. Students could not believe at first that the university was truly foregoing punitive measures and offering support if they showed a help-seeking attitude. All over academia, the student body carries an instilled fear of harsh consequences in case their substance use gets noticed. Their skepticism was only natural given that the reprieve being offered did not align with the idealistic and thorough administrative protocols established by public regulatory authorities, which all universities are bound to follow. It took us a few months to convince the student body that the management had not set a trap.

Reservations to the reprieve-based approach also came from the administration department whose job it is to impose discipline through enforcement. They feared that leniency would make it harder to convince everyone that we were serious about our zero-tolerance-for-drugs policy, thereby rendering uniform implementation of the policy more difficult.

The university opted for a twin stance: “zero tolerance for drugs because they are illegal” and “the door to help is always open.” Most importantly, the immunity offer was left entirely to the student’s choice, recognizing the fact that meaningful and impactful change cannot be coerced. We encouraged

students to think of it as an act of self-awareness and courage instead of an offense or admission of guilt. Our narrative was simple, yet powerful: If you want us to support you in making the right and healthy life choices, we are there for you, but if you choose otherwise, do not blame the university for following the enforcement protocols, even if it entails terminating your academic tenure at BNU. Students who came forward were enrolled in the SUCP, becoming participants of a structured support mechanism with personalized intervention plans based on a rehabilitative framework.

For those who joined the program, the university also considered academic accommodation in cases where students were experiencing significant mental health or substance-related challenges. However, while acknowledging that rigid academic expectations can deepen distress, BNU was equally mindful that accommodations can be misunderstood or misused if not administered carefully. A conservative, protocol-driven approach was therefore adopted. The counselor could flag cases to the academic schools where accommodation might be warranted. In non-emergency situations, the counselor could recommend a specific form of accommodation, but the final decision remained with the school. On the other hand, in acute or emergency cases involving clear duty-of-care concerns, schools were mandated to act on the counselor's recommendations. This ensured that students knew that while accommodation functioned as targeted support to protect student well-being, its use would not be allowed to undermine academic integrity or institutional fairness.

#### **4.1.2 The Psychological Scaffolding of the SUCP**

The CCPW undertook thorough screening and assessment by using standardized psychometric tools for the evaluation and identification of substance use prevalence and intensity as well as its underlying causes. This step helped provide students with tailored support. It also allowed a regular review of each student's progress and ensured timely intervention for cases that required enhanced care or external referrals to medical professionals or had co-morbid conditions that might be aggravating the substance use issue.

#### **Box 5: Screening and Assessment Tools Used**

- The Drug Abuse Screening Test (DAST) is a standardized, brief screening tool with high test-retest reliability. It is one of the most popular assessment tools for substance use and addiction evaluation.
- The Depression, Anxiety and Stress Scale (DASS-21) has sound psychometric properties and is strongly recommended as a routine screener in young adults with substance use and addiction problems (Moska et al., 2023). Stress, depression, and anxiety have a very high prevalence as co-morbid conditions in such populations, which makes it necessary to screen these individuals to provide timely care.
- Brief-Coping Orientation to Problem Experienced Inventory (Brief-COPE) is a widely used scale in counseling, healthcare, and research settings to study both adaptive and in-adaptive coping mechanisms in individuals. It is also recommended for populations struggling with substance use and addiction. Studies show significant relevance of this tool in coping styles of the subject and severity of substance use in young adults (García et al., 2018).
- The World Health Organization Quality of Life (WHOQOL) is a valuable tool that comprehensively reviews various dimensions of quality of life to see the effects of different substances on individuals. These individuals often experience a negative impact on mental, social, economic, and emotional well-being, thus affecting their quality of life (Bratu et al., 2023; Skevington et al., 2004).

### 4.1.3 Individual and Group Counseling Sessions

One key intervention strategy was the thoughtfully tailored one-on-one and group counseling sessions for students who were enrolled in the SUCP. These sessions were structured according to the unique needs of each participant and turned out to be extremely effective in terms of catering to the psychological, emotional, and social needs of the students. The one-on-one sessions were conducted in the early phase, when other preventive and enforcement components of the program were also set in motion. These sessions were initially conducted with students who directly approached the CCPW. As the program matured, referrals expanded to include students identified as high-risk through administrative observation, academic monitoring, or peer referral. Following an initial clinical assessment, session frequency was determined collaboratively between the counselor and the student, typically ranging from weekly to biweekly engagements, with adjustments made over time in response to progress, stabilization, or emerging needs. These sessions provided a confidential, non-judgmental space focused exclusively on student well-being. They played a critical role in building rapport, establishing trust, and enabling students to reflect honestly on their experiences without fear of labeling or punitive consequences. Therapeutic interventions were informed by a combination of Motivational Interviewing (MI) to enhance readiness for change, Cognitive Behavioral Therapy (CBT) to address maladaptive thought patterns, Rational Emotive Behavioral Therapy (REBT) to challenge irrational beliefs, and trauma-informed approaches to account for underlying emotional distress or adverse experiences. Throughout the process, care was taken to ensure that students were not pressured toward predetermined outcomes. Instead, they were supported in exercising autonomy, developing insight, and setting self-directed goals for recovery and well-being.

Group counseling sessions were introduced as a complementary intervention to address the relational and social dimensions of substance use that individual therapy alone cannot fully capture. Participants were carefully selected based on shared challenges and contextual similarities, allowing for the development of psychological safety, mutual identification, and peer accountability. Groups typically comprised 6-10 participants, a size chosen to balance meaningful interaction with clinical manageability. To reflect diverse living circumstances and gendered experiences, three distinct group formats were established: one for day scholars; another for students living independently away from their families; and yet another exclusively for female students.

“

Every time I attended the counseling session, it was a comforting experience. The counselor always listened and provided a safe space.

”

Group sessions were held once a month in designated on-campus spaces that ensured privacy, confidentiality, and uninterrupted engagement. Facilitated by mental health professionals, these sessions focused on exploring underlying drivers of substance use, strengthening coping strategies, enhancing emotional regulation, and developing relapse prevention skills. Where appropriate, anonymized case studies, recovery narratives, and family verbatims were incorporated to normalize help-seeking, reduce isolation, and counter stigma. The group setting also functioned as a structured peer-support environment, allowing participants to learn from one another's experiences while maintaining therapeutic boundaries.

In addition to formal group counseling, small peer-support groups were established among students enrolled in the SUCP to reinforce continuity and social connection. These groups met 2-3 times per semester under a structured and confidential format, with one open discussion session each semester to encourage reflection and collective learning. Sessions emphasized motivation for recovery, emotional regulation, rebuilding healthy social networks, and sustaining behavioral change over time.

Together, this layered counseling framework – combining individualized therapy, structured group intervention, and peer-based support – enabled the SUCP to address substance use as a complex, evolving experience. By prioritizing healing over punishment and continuity over crisis response, the program created pathways for recovery that were both compassionate and sustainable. Moreover, BNU strongly promoted wellness programs to strengthen the preventive and restorative elements of the Program. The CCPW conducted regular stress management and mindfulness sessions for students, staff and faculty to build emotional and mental resilience. We also brought in renowned retreat experts like Soul Sanctuary to further underscore the importance of mental well-being. These initiatives helped in normalizing the conversations around psychological and mental wellness challenges on campus.

#### **4.1.4 Promoting Early Detection and Self-Awareness**

Recognizing that not all students are ready to seek formal counseling at the outset, the SUCP deliberately expanded its empathy and support framework beyond clinical settings. Low-threshold, non-intrusive mechanisms were introduced to encourage early engagement, normalize help-seeking, and identify risk before escalation. These measures were designed to complement counseling services, not replace them.

Early risk detection formed a critical component of this approach. During the orientation week for the incoming class for both Fall and Spring semesters, wellness screening tools were introduced to all incoming students as part of routine onboarding rather than as a targeted intervention. The aim was to allow the students to use these tools to self-reflect on stress levels, emotional well-being, and coping patterns, and to flag concerns anonymously through a secure online portal without breaching confidentiality. This design reduced fear of exposure while enabling early identification of students who might benefit from additional support. Importantly, participation was voluntary. The university was also extremely careful to stay away from any action that could be misconstrued as an attempt to profile the entire incoming class and forcibly categorize problematic students. Such profiling should never be considered as it risks leading students to question the university's intent and breaching their trust.

The SUCP leveraged digital and multimedia platforms to broaden awareness and prevention efforts in formats that resonated with students. Student-led podcasts were developed as part of academic and co-curricular projects, particularly by students from BNU's School of Media and Mass Communication, focusing on youth mental health, substance use, stress, peer pressure, recovery narratives, and help-seeking behaviors. The podcasts functioned as peer-to-peer psycho-education tools, creating a non-threatening entry point for engagement.

These initiatives were further amplified through collaborative webinar spaces (e.g., Psych Station) and the university's Instagram page, *BNU Wellness Corner*. The Instagram platform maintained consistent messaging around mental health, substance-use awareness, and available support pathways. Content was released periodically, aligned to ensure sustained visibility across semesters. Webinars were also scheduled at strategic points during the academic year to maximize student participation.

Simultaneously, BNU facilitated capacity building for a small subset of its faculty and staff to act as early identifiers of mental health struggles among their students. Training and orientation sessions were held to enable them with skills that could help them recognize early signs of distress in students and respond effectively as well as manage crisis situations. Faculty could identify warning signs like withdrawal, sudden behavioral or physiological changes, academic decline, aggression, or crisis statements (e.g., suicidal/self-harm ideation). As part of these orientation sessions, informal support programs were

also launched for each department which provided safe spaces to faculty to reflect on their experiences with challenging students, manage burnout, and share concerns while maintaining healthy professional boundaries. These trainings were conducted once every academic year with shorter follow-up meetings held each semester.

These efforts extended the reach of the SUCP's empathy-led approach. By embedding prevention, early detection, and awareness into everyday institutional spaces, the program aimed to reinforce a culture in which support was accessible, visible, and normalized.

#### **4.1.5 Broader Peer Support**

Broader peer involvement played an important role in the SUCP. Across campuses worldwide, the overwhelming majority of students neither engage in nor endorse substance use. At BNU, this majority was deeply invested in restoring the university's positive campus culture. Yet, many students did not feel empowered, or safe enough, to actively support institutional efforts. Recognizing this fact, the administration exercised caution in defining student roles. A deliberate decision was made not to entertain student offers to act as informants. While such an approach might have increased detection efficiency, it risked creating an atmosphere of mistrust and mutual suspicion. Since BNU's overarching objective is to cultivate a campus environment where students form lifelong bonds across social, economic, and geographic divides, addressing substance use had to be treated as an important, but not overriding, component of this larger educational purpose.

To elicit student involvement, we encouraged the Well-being Society, led by our graduate students from the Institute of Psychology, to champion peer engagement initiatives focused on awareness, dialogue, and support rather than surveillance. Peer counseling was promoted, and the Well-being Society played a key role in organizing guest lectures and discussions that normalized help-seeking and mental health advocacy. It was mandatory for all students enrolled in the SUCP to attend every event on prevention of substance use and related issues organized by the university. These workshops and seminars, typically arranged by the Well-being Society, the Institute of Psychology, CCPW, and the Office of Student Affairs, involved local and international speakers and were designed to promote psychological awareness and preventive education. The Well-being Society also helped sustain student dialogue through post-session reflections and peer-led initiatives with the

ultimate goal of catalyzing a cultural shift where such conversations became the norm. These initiatives also helped in clearing the many myths and misconceptions surrounding different types of substances and their effects, often used to downplay the consequences of substance use.

#### **4.1.6 Families as Allies in Change**

Family involvement is always a delicate matter at universities. Strictly speaking, university students are legal adults and thus need to give consent for the university to engage with their parents/guardians. BNU is very particular about this aspect since we seek to provide students with the confidence and instill in them the responsibility to manage their own affairs. However, when duty-of-care obligations become relevant, this inclination must be superseded. Yet, institutions need to remain mindful that family involvement is not always beneficial for students. In many cases, stressed relationships within families or abusive environments are the underlying cause for substance use. The university setting – instead of the home – acts as the 'escape' for such students. Pulling the family into the conversation risks making matters worse in these cases.

The SUCP treaded this path carefully, tapping student families to bolster the SUCP's support network only when their support was considered to be likely and deemed to be important. Empathy and patience were the key tools to ensure that sensitive information was shared in a way that honored the university's duty-of-care while maintaining as much confidentiality about the student's situation and actions as possible. This approach created a trusting atmosphere, both with the student and their families, which helped in addressing denials, confusions, and shock responses from the families. All relevant personnel from the BNU community who engaged with parents and guardians worked tirelessly to nudge them towards acceptance and active participation in taking their loved ones out of the substance-use crisis.

#### **4.1.7 External Referrals**

While BNU sought to provide as much in-house support as possible, it was neither realistic nor responsible to assume that all needs could be met internally. A curated list of external mental health professionals was therefore maintained and shared with students requiring medication management, withdrawal support, intensive psychotherapy, family therapy, or heightened discretion.

BNU's Institute of Psychology played a pivotal role in facilitating professional linkages, connecting the university with experienced psychiatrists, addiction specialists, and therapists who also contributed to on-campus lectures and workshops on substance use treatment and prevention. Initially, a small number of highly experienced psychiatrists and rehabilitation centers were engaged as informal partners for complex cases requiring extended or specialized care. The intention was to formalize these partnerships over time to expand clinical feedback loops, the rehabilitative scope of the SUCP, and research collaboration.

Students accessing external care remained formally under the SUCP's oversight, with the requirement that they disclose the treating professional's identity and provide periodic progress updates. Monitoring mechanisms were structured to have a systematic review of the participant's progress, stakeholder feedback, and elemental provisions. These meetings acted as checkpoints to know what was working, what needed improvement, and how any upcoming challenges could be handled preemptively. Where external professionals were referenced, appropriate disclaimers clarified that these individuals were consulted solely for their expertise, had no formal contractual relationship with the SUCP at the time, and received no monetary compensation from the university. This process represented continuity of care through the SUCP without intruding upon clinical autonomy of the medical professions and while ensuring that the entire support structure for the student in question was working in unisons.

#### **4.1.8 Dealing with Crisis Situations**

Just one unfortunate incident on a university campus that goes unmanaged or results in harm to an individual due to a mental health crisis can undermine the credibility of an otherwise well-functioning SUCP. Conscious of this fact, BNU worked to equip every department with trained personnel to handle psychological emergencies with a standardized, culturally sensitive protocol. A Psychological First Aid training process was piloted. To ensure widespread coverage across campus and adequate crisis readiness, each academic school was asked to nominate three volunteers to participate. Representatives from relevant administrative departments were also included.

The sessions led to the formation of a dedicated Crisis Response Team (CRT), trained specifically to handle mental and emotional crises, including panic

episodes, self-harm threats, suicidal disclosures, traumatic incidents, and acute behavioral dysregulation. Members of the CRT included counselors, academic coordinators, administrative personnel, and hostel wardens for after-hours coverage. They were given step-by-step guidance on how to manage sensitive students and situations within and outside the classroom setting, what resources they would need to cater to a crisis situation, and when and how to refer students to the CCPW for extended support. Annual simulation drills and regular case-based discussions were conducted to ensure that the CRT remained well-practiced and confident in handling emergencies. Informal WhatsApp groups, both university-wide and department-specific, were also established for better coordination and real-time access to the counselor for immediate guidance, updates, and micro-training prompts. In addition to the counselor, these groups typically included a focal person from each department (mostly the head of department), faculty members, and student advisors and/or academic coordinators. This structure enabled detection of at-risk students, strengthened faculty confidence to handle crises, and created a culture of shared responsibility for student well-being.

Institutional readiness was reinforced through on-campus resources such as psychological first aid kits, trained medical personnel, on-call healthcare partners, a well-equipped ambulance, and designated (although not purpose-built) recovery and stabilization spaces across departments. Together, these layered measures ensured that acute situations could be managed swiftly, consistently, and humanely. Equally important, they reinforced the core institutional message: seeking help would lead to care and support – not punishment –, thereby presenting the SUCP as a resilient, campus-wide safety net rather than a reactive intervention. This is why emergency response readiness was deliberately integrated into SUCP's empathy framework instead of being treated as an enforcement function.

BNU has documented learnings from these trainings in a comprehensive manual, *Campus Care: A Guide to Psychological First Aid for Universities in Pakistan*. The manual offers a step-by-step guide for first responders, outlining culturally-relevant strategies for de-escalation, safety planning, emotional stabilization, crisis documentation, and coordinated referral pathways.

#### **4.1.9 Sustaining Student Journeys to Drug-Free Behavior**

A defining feature of the SUCP was its emphasis on sustainability, ensuring that support extended beyond initial intervention and counseling to perman-

ent behavior change in the student. Recovery was framed not as a one-time event, but as an evolving process. To this end, mutual recovery goals were established between the counselor and the student, and where appropriate, with families and medical professionals. These goals were explicitly therapeutic rather than disciplinary, helping students navigate challenges constructively while maintaining dignity and agency. Any positive drug screening result of a student who was part of the SUCP was followed by a non-punitive response plan, prioritizing counseling, medical referral where necessary, and parental engagement when appropriate. This approach reinforced the principle that accountability and care are not mutually exclusive, and that meaningful recovery requires continuity, trust, and structure.

Sustainability of the program was also helped by the BNU team's efforts to learn from its experience as the program evolved. Periodic review meetings were held to solicit stakeholder feedback. These reviews were treated as checkpoints for course-correction and to further enhance program effectiveness in pursuit of improved student outcomes.

*Table 1: Ingredients of Success of the SUCP's Empathy Framework*

Empathy-Led Strategy	Risk Detection	Emergency Readiness	Awareness	Monitoring & Learning
<ul style="list-style-type: none"> <li>Incentivize student participation by highlighting support rather than penalties</li> <li>Implement support through professional counselling methods</li> <li>Engage additional support mechanisms such as families and external medical professionals as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>Integrate wellness screening tools during student orientation periods</li> <li>Maintain confidential and anonymous reporting channels</li> <li>Enable faculty, staff, and peers to flag concerns without breaching trust</li> </ul>	<ul style="list-style-type: none"> <li>Develop clear crisis-response protocols for substance-related emergencies</li> <li>Train a multidisciplinary Crisis Response Team (CRT)</li> <li>Conduct simulation drills</li> <li>Maintain on-campus access to medical care, psychological first aid, and stabilization spaces</li> </ul>	<ul style="list-style-type: none"> <li>Use podcasts, social media, and student-led multimedia to normalize dialogue on substance use and mental health</li> <li>Leverage academic departments (e.g., media, psychology) to co-create awareness content</li> <li>Treat communication as prevention, not publicity</li> </ul>	<ul style="list-style-type: none"> <li>Establish periodic review meetings to assess program effectiveness, participant progress, and stakeholder feedback</li> <li>Treat reviews as checkpoints for course-correction, not fault-finding</li> <li>Ensure cross-departmental participation to preserve shared ownership</li> </ul>

## 4.2 Constructive Outlets

Alongside empathy-driven support, BNU identified a second, equally critical pillar in addressing substance use: the deliberate expansion of constructive outlets that channel students' time, energy, stress, and creativity into healthier alternatives. Empathy can offer direct support and create a safe space, but it can only be optimized with meaningful engagement that provides a substitute for loneliness and isolation. Indeed, BNU's experience reinforced an important insight: both unstructured free time and overly compressed academic schedules increase vulnerability to substance use — whether as a response to boredom or as a coping mechanism for stress. Constructive outlets were therefore designed to serve a dual function; they would reduce idle exposure to risk while offering legitimate relief from academic, emotional, and social pressure.

### 4.2.1 Revitalizing Extracurricular Life at BNU: Societies and Sports

BNU has long maintained a vibrant extracurricular culture. However, the SUCP prompted a reassessment of how these opportunities could be leveraged to tackle substance use as well. While several student societies and clubs existed, there was a need to revitalize them, broaden their reach, and ensure they fostered genuine peer connection and belonging. The vice chancellor consistently emphasized to students that unlike schools, the classroom represents only one part of the university experience. Participation in societies, clubs, sports, and co-curricular activities was framed not as optional leisure, but as central to student development. BNU schools with traditionally rigid academic schedules were encouraged to adopt a more holistic view of student success and allow greater flexibility for engagement beyond their coursework.

As part of this effort, the number of active student societies and clubs expanded significantly from 11 at the start of the SUCP to over 20. The university began exposing students to the various societies during the orientation week so that the incoming class could immerse themselves in co- and extracurricular activities to reduce initial vulnerabilities. Each BNU student society is encouraged to have membership across the university's eight academic schools, thereby offering diverse peer exposure and friendships beyond the student's immediate academic cohort. They operate under the patronage of a faculty member and the supervision of the Office of Student Affairs, ensuring mentorship, accountability, and alignment with institutional values. Moreover, evening

campus life was intentionally revived through interdepartmental events involving students, faculty, and staff.

One of the most visible cultural shifts occurred in BNU's approach to sports and physical activity. Despite supporting multiple athletic teams, campus facilities historically shut down at sunset based on the assumption that students preferred to leave early due to the campus's considerable distance from the city center. All university transport facilities were scheduled accordingly. This assumption was tested, and fortunately, proved grossly misplaced. A simple intervention involving the installation of floodlights at the football ground followed by a lit cricket nets alone was responsible for transforming campus evenings almost instantly. Student response was overwhelmingly positive and helped expand peer engagement. BNU subsequently invested in improving its sports infrastructure to encourage further recreation. In 2024, BNU launched B.Fit, its on-campus gym. It also introduced sports scholarships. A dedicated sports complex has recently been constructed. BNU has also been increasing its participation in external sports and co- and extracurricular events.

Campus life was also enhanced by extending library hours, expanded informal gathering spaces, and the establishment of BNU's Biodiversity Hub, a nature-based garden that promotes calm, reflection, and sustainability. The campus still lacks adequate common spaces for students to mingle. A student community center, which will address this concern, will become operational in 2027.

#### **4.2.2 Curating Social Events without a Compromising Culture**

BNU recognized that large social events, while vital to student life, can inadvertently expose students to substances if not carefully managed. The university's flagship events such as Bestival, which attracted thousands of attendees but were also prone to such unwanted exposure, were consciously redesigned. While still celebratory, these events became academically grounded and socially curated, with tighter controls on access and programming. Similar adjustments were made to other annual events, including BNU's Model United Nations (MUN) and inter-university sports festivals. Such recalibration reduced scale and visibility of the events, but it signaled the university's intent to prioritize safety, legality, and cultural integrity over a mere spectacle. This, combined with support for students to organize new and diverse social and academic

events and gatherings to increase the volume of activity and suit the interests of as many students as possible, has resulted in a quantum jump in terms of the frequency and diversity of campus activity.

#### **4.2.3 Coping with Academic Pressure**

BNU is rightly proud of the academic rigor of its programs. But we are also cognizant that this generates significant pressure and can potentially cause stress among students. Counseling data revealed that irregular routines, prolonged 'nighters', and chronic exhaustion were correlated to substance use that was framed as stress management or cognitive enhancement. Recognizing academic stress as a structural issue, BNU piloted a 'Peer Mentorship Program' during the 2024-25 academic year, which paired academically strong students with peers requiring support. Following a successful pilot, the program was fully implemented in 2025, strengthening academic resilience and hoping to reduce reliance on maladaptive coping mechanisms.

Moreover, the university identified that a large proportion of BNU students were inclined towards entrepreneurship. Some were already successful entrepreneurs. Apart from this being a generational trend, BNU's creative disciplines also encourage such choices over traditional employment opportunities. To provide these students with productive channels, BNU expanded innovation-focused platforms. The Innovatrium, BNU's innovation hub, was set up in 2024. It provides mentorship, co-working spaces, upskilling opportunities, and exposure to investors and industry leaders. BNU Connect, Innovatrium's main project-based intervention, facilitates interdisciplinary collaboration by requiring student groups from at least three BNU (out of eight) schools to work on real-world challenges while the Venture Den offers a dedicated space for students to showcase and grow small businesses within the campus ecosystem.

#### **4.2.4 Access, Empowerment, and Direct Communication**

A recurring theme both in literature and BNU's lived experience is that a diminished sense of belonging often underpins human vulnerability. While individual susceptibility may vary – shaped by personality, background, or temperament – a university's institutional antidote lies in student empowerment. For today's Gen-Z students, voice, access, and responsiveness are not privileges, they are baseline expectations. Yet, these remain difficult to operationalize within the hierarchical, age-stratified culture that characterizes Pakistan's society, and by extension our educational institutions.

BNU consciously invested in institutionalizing transparency and two-way communication. To facilitate this, it introduced a dedicated e-portal-based communication mechanism that allows students to access all student services, share concerns, offer suggestions, and provide feedback on academic and administrative processes, including the SUCP. The portal eliminated the need for students to navigate multiple administrative offices physically, often a cause of stress itself, and replaced opacity with direct access. We hammered the importance of this portal and emphasized it as a mechanism of student support that offered a far better model of empowerment than traditional, typically-politicized student councils. Most notably, the vice chancellor made himself directly accessible for students to write to him (including anonymously) through this platform, committing to personal responses within 24-48 hours. The impact was immediate and profound. Students consistently reported a heightened sense of agency simply by knowing that they could reach the top management. Importantly, the portal was designed as a listening mechanism, not a disciplinary one. Students were allowed to vent frustrations without fear of reprisal, even when messages fell short of formal decorum. The emphasis remained on engagement, response, and resolution rather than sanction. Through this experience, we found that student satisfaction with two-way communication is not necessarily linked to an expectation of their demands being met; they simply want to know that they are being genuinely heard. The e-portal turned out to be the perfect tool to achieve this.

Simultaneously, the university management began working on another weakness. While BNU boasts major achievements in its two decade-plus history, it had a relatively weak culture of celebrating its many accolades. We recognized this as an avenue that would help create a positive vibe, highlight our champions, encourage others to follow them, and lift individual and institutional morale. Annual faculty, staff, and alumni awards were introduced in 2023. Student awards are commencing in 2026. Last year, a Wall of Honor was inaugurated that carries the names of our high achieving students, our National Talent Fellows from across Pakistan, and our employee award winners. Moreover, the vice chancellor recognizes all major student achievements in his weekly video message to students. He also personally meets all students with co-curricular achievements regularly and hosts an academic high-achievers get together for faculty, staff, and students each semester. Since 2025, the university has also started issuing a monthly e-newsletter, capturing prominent activities and achievements of the university. An annual bulletin has been introduced as well.

Collectively, these initiatives transformed the campus environment from one that may have been potentially vulnerable to maladaptive behaviors into an environment oriented towards purpose, engagement, and shared celebration. Empowerment itself became a protective factor, reinforcing belonging, trust, and institutional legitimacy. Expanding choice, agency, and connection not only addressed substance use itself, but also the structural conditions that enable it.

### **4.3 Enforcement**

Without empathy and enhanced constructive engagement, an SUCP would be meaningless. But without being complemented with strict enforcement of discipline, the approach would be idealistic, if not naïve. BNU utilized the third pillar of the SUCP unapologetically, but in support of – rather than leading – the other two components. The university's administration department took the lead in enforcing disciplinary protocols through a series of proactive, coordinated, and sustained measures aimed at prevention, detection, and control of substance use. The enforcement framework combined strengthened on-campus vigilance and environmental controls; targeted collaboration with law enforcement agencies where supply networks extended beyond BNU's jurisdiction; and clearly-communicated governance and disciplinary procedures for the entire university community. By doing so, it acted as a deterrent against substance use and helped disrupt supply chains operating within and around the university. The university also ensured the provision of transparent institutional mechanisms for any disciplinary actions related to substance use.

#### **4.3.1 Mapping the Drug Ecosystem and Identifying Suspects**

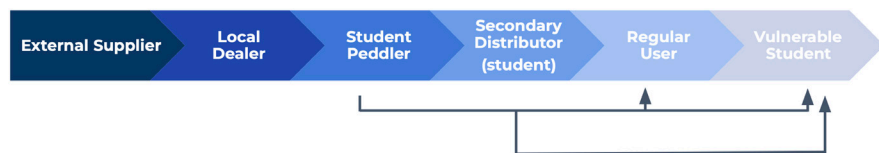
Effective enforcement required more than heightened surveillance or reactive penalties. It demanded a clear understanding of how substances entered, circulated within, and spread across the university. Over time, SUCP developed a working map of this ecosystem, allowing enforcement measures to be targeted at points of highest leverage rather than applying them indiscriminately.

At its core, the flow of drugs followed a consistent pattern, and we suspect this will be the case across most peer institutions. External suppliers operating in surrounding localities provided substances to local dealers, who in turn relied on student peddlers to distribute internally. These students acted as primary distributors on campus, often supported by secondary connectors who

expanded reach across hostels, classrooms, and social circles. Regular users sustained demand, while new or vulnerable students, particularly new students, females, and hostel residents, were frequently targeted to expand the net. Student peddlers leveraged familiarity, peer trust, and shared living spaces to normalize use and conceal distribution. Hostels, parking areas, and informal gathering spots emerged as key nodes enabling storage and exchange. Externally, suppliers maintained contact through delivery agents, riders, or retail dealers operating around private hostels and cafés in the vicinity of the campus.

Mapping this ecosystem accurately was crucial. It allowed the university to distinguish between users in need of support and actors sustaining supply chains, and to align and target counseling versus enforcement responses accordingly. By identifying how drugs moved across external and internal nodes, we were able to disrupt networks strategically, often by intervening at the ‘center of gravity’ rather than thinning out the effort across the entire campus.

Figure 4: The Drug Supply Chain



The university also focused its efforts by utilizing student data and analyzing unusual patterns. For example, a small number of students with repeated requests to freeze semesters or habitual enrollment and de-enrollment patterns without significant degree progression caught our attention. Other red flags included irregular fee payment patterns, including sudden clearances of large dues. Similarly, we identified a staff member who had a low-paying job at the university but used to drive to campus in his own car from his residence more than 50 kilometers away. Over time, we also discovered that students involved in peddling often knew each other and clustered socially. Identifying one person frequently led us to the associated group, enabling quicker disruption. This targeted approach eschewed the need for an indiscriminate strategy that would cast the enforcement net across the entire student body. Neither did we have the capacity to do so, nor would we have been able to implement it without creating an air of mistrust and denting the SUCP’s empathy-first approach.

## 4.3.2 On-Campus Controls and Visible Deterrence

### 4.3.2.1 Strengthened Surveillance

One key enforcement-related learning for BNU has been that it is necessary to know the physical attributes of the entire campus thoroughly. The student body tends to gravitate towards blind spots — areas that are unmonitored or loosely supervised. At BNU, certain open spaces, basement corners, parking zones (at night), and unsupervised corridors became vulnerable ‘grey areas’ where risky and shady activity was perceived to be more permissible. Some of the information about vulnerable areas was gathered through vigilance while some came from the counselor’s interactions with students. Establishing a uniformly secure campus was not a simple switch; it required persistent redesign of how visibility, monitoring, and accountability operated in daily campus life. In BNU’s case, the task was even more challenging given the management’s instructions that it had to be done without expending too many additional resources.

The administration’s efforts to establish a vigilant monitoring network across campus to discourage and deter substance use and associated negative behaviors under influence entailed three simple operational decisions:

- A thicker CCTV network: Additional cameras were installed to cover blind spots and known hotspots, with feeds monitored more actively to enable quicker response.
- Better lighting in vulnerable zones: Areas that were previously under complete darkness in the evenings were lit to remove ‘safe cover’ for misconduct.
- Increased patrolling and faster internal coordination: Reinforced physical patrolling and more effective communication between administrative and security staff created a heightened sense of institutional presence and reduced the opportunity for violations.

Hotspot identification was intentional and strategic. One early focal point of our intervention was a courtyard, euphemistically known as the “airport” (*ja-haaz*), which was widely understood to be a hub for substance users. Starting there allowed the university to signal clearly that it was intentionally hitting the center of gravity as it meant business. Other hotspots, particularly parking areas, were then systematically monitored, especially at night, and clear signals

were sent that these spaces were under watch.

Hostels are typically one of the most vulnerable campus facilities for substance use. At BNU, we did not have a policy that allowed us to enter student rooms. The administration consciously avoided adopting a heavy-handed approach, recognizing that such tactics can quickly shift the campus culture from being supportive to fearful. Instead, deterrence relied on enhanced perimeter vigilance, stricter rule enforcement (e.g. no smoking in hostels), selective inspections only with due cause and student consent, and visible signals of institutional resolve. Only later, once the drug-free environment had been achieved, did the university adjust policy to allow more clearly defined room-inspection protocols, still under strict guidelines.

Meanwhile, to reduce infiltration risk, visitor and vehicle control procedures were strengthened at entry points. Manual CNIC verification and visitor logs were enforced to improve traceability. Hostel guest access continued to be managed through structured sign-in/sign-out protocols. Over time, we realized the modest but regular use of fake BNU ID cards to enter campus by individuals posing to be students. To address this, the university began its transition to a campus-wide Radio-Frequency Identification (RFID) card system, which has just been completed.

During the initial phase where intense enforcement efforts were meant to signal intent and establish deterrence, security teams also conducted random bag checks and spot inspections in hostels, parking zones, and event venues. During concerts, large student gatherings, and night events, additional screening measures were implemented, often in close collaboration with external law enforcement to ensure comprehensive coverage.

Finally, largely to create a demonstration effect in the early phase, the Anti Narcotics Force (ANF) was requested to bring sniffer dogs on campus sparingly for random sweeps of high-risk areas, including hostels, parking zones, and even staff offices (to maintain fairness and transparency). Religious and cultural sensitivities were respected throughout and no individual's private space was breached. These sweeps were designed more to enhance deterrence rather than to 'catch' anyone.

“

The experience was handled professionally and respectfully, which helped build trust in the system. It wasn't about targeting individuals, it was about creating a safer, more responsible environment for everyone.

”

### 4.3.2.2 Managing Smoking and Vaping as a Risk-Reduction Tool

The university management made a conscious, even if controversial, decision not to force students to give up smoking/vaping (hereafter smoking) altogether immediately on campus. Besides being mandated by the Higher Education Commission to ensure smoke-free campuses, intuitively too it would have made sense to eliminate all smoking given the concern that students might fall on a continuum where smoking often precedes or co-exists with drug exposure. But precisely for this reason, abruptly forcing a complete ban on smoking would have made students more – not less – vulnerable to substance exposure in BNU's geographical context.

BNU's semi-developed and inhabited periphery created a peculiar risk. The university uses one main entry/exit point, the area around which is not easy to oversee, especially at night. There is also no municipal and law enforcement presence in the immediate vicinity. We were concerned that forcing students to leave campus to smoke could create a fresh avenue for access to drugs, particularly around nearby private hostel facilities, one of which did in fact subsequently require law enforcement action and firm warnings to students residing there.

Therefore, while remaining committed to creating a smoke-free campus in principle, the university chose an incremental approach. Prior to the intervention, students could smoke in any open space on campus. The initial step was to restrict smoking to four zones, spread out for convenience but also chosen because they were not central and required some effort on the part of the students to access. The rule applied equally to faculty and staff who could earlier smoke inside their offices. The reason to set up zones was both to remove the sight of smoking as a common occurrence around the university, the first step towards making the activity an aberration rather than a norm, as well as to ensure ease of monitoring for the administration. Multiple leads that drove us to drug peddlers were obtained by monitoring and profiling student presence and movements to and from the smoking zones.

### 4.3.3 Off-Campus Disruption

On-campus vigilance was a necessary prerequisite to controlling the presence of drugs. But alone, it would not have been sufficient. The areas just outside the university were closely linked to access and it became clear over time

that without disrupting supply channels operating in the vicinity, on-campus enforcement would remain reactive and only partially effective. All the data we gathered through anonymous tips, surveillance, information voluntarily shared by students and staff, and known use history of some student groups pointed to the necessity of tackling the external drug peddling network.

Our first challenge was to convince our own community that BNU's jurisdiction would not end within its walls. If we were truly in the business of shaping our students to become responsible citizens, anything illegal or untoward performed outside ought to be as much our concern as something happening on campus. BNU's leadership adopted a categorical position that the university's remit cannot be limited to our campus as far as illegal activity is concerned, especially when it directly affects student welfare and institutional reputation. This was a hard sell but we persisted and the stance gradually seeped in and was eventually accepted, even if grudgingly.

#### 4.3.3.1 Support from Law Enforcement

BNU made the difficult decision to involve law enforcement in a handful of peddling cases to set the right tone from the outset. This was not a simple choice. Universities should ideally resolve student issues through safe and supportive pathways. However, when a small number of students begin endangering the wider community, degrading campus culture, and risking reputational damage to the overwhelming majority, it constitutes a breach of the university's social contract with its students and demands a proportionate institutional response.

Law enforcement collaboration proved immensely helpful, especially in interdicting supply lines where drugs were being exchanged in the immediate vicinity of the campus. Requested to intervene only when necessary, the ANF and police supported information gathering, pursued leads, raided external premises, and helped map local supply chains, allowing the university to interdict strategically to break access points. In cases where online peddling activity masked identities but involved strong circumstantial evidence of student participation, FIA's cybercrime wing and other agencies with investigative capacity proved instrumental in leading us to the perpetrators.

#### 4.3.3.2 Random Drug Screening Initiative

BNU's introduction of a random drug screening protocol was arguably the most controversial enforcement intervention. The existing empirical evidence on random drug screening in educational institutes remains mixed and context-dependent. Literature posits it as part of a multi-component support plan rather than a standalone intervention (DuPont et al., 2013; James-Burdumy et al., 2012). At BNU, we approached random screening as a means of broadening risk management. Although conducted on campus, the screening was fundamentally meant to check for and deter off-campus substance use. From the outset, the administration anticipated resistance, and it came from both substance users and non-users. However, the university management stayed firm.

To implement the screening, BNU partnered with reputable labs, relying mostly on urine tests for this purpose. Results were handled with strict confidentiality. Only the counselor had access to the results portal, and this access was transparently known to students. Still, early discomfort and stigma of being tested was palpable. Rumors circulated that only 'suspects' were being tested and a trap was being set to single out students who had not been caught in the act but the university knew are substance users. This was not true – screening was fundamentally positioned as an early detection rather than a punitive dragnet – although the CCPW and administration department naturally wanted students they were specifically concerned about to be part of the sample of students tested each time. To ease student concerns, the university leadership decided to lead from the front. The Deans' Council collectively agreed to be tested to signal that the initiative was not directed at students alone. This decision was communicated openly to students and videos of the Deans' Council members being tested were posted. While student concerns eased, some resistance to the very concept of conducting random screening has lingered.

The university remained steadfast in implementing the policy universally but screening has been conducted sparingly over time in order to avoid any major backlash. Random screening conducted at a mass scale can also become extremely expensive. Therefore, financial constraints dictated a cautious use of this tool as well. This was also one reason for preferring urine sampling over other more expensive techniques.

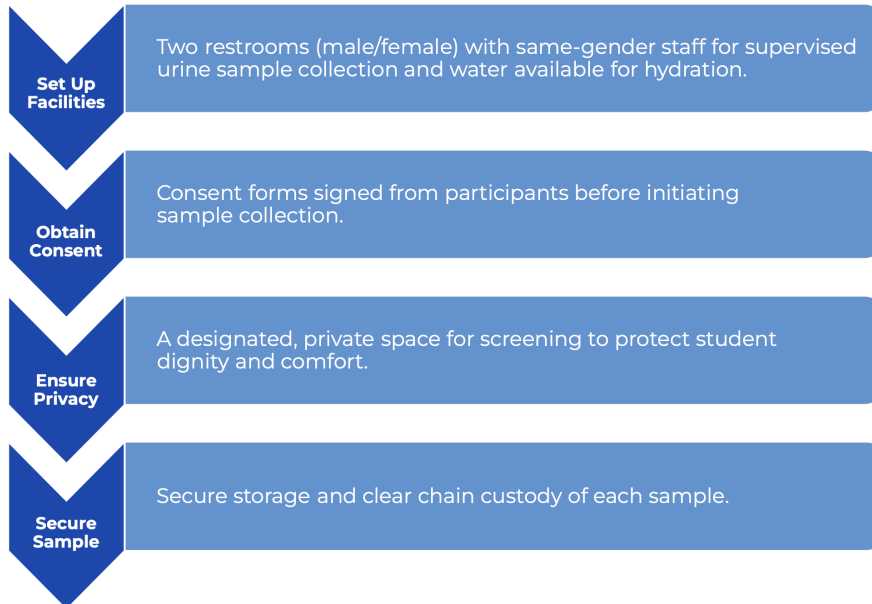
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Over time, I saw a noticeable positive shift in the culture at BNU. Students became more mindful, and there was a stronger sense of accountability within the community. Instead of being something to fear, the testing became a step toward maintaining a healthy and focused academic environment.

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Overall, random screening emerged as one of SUCP's strongest deterrence tools. Screening also served as a forcing mechanism. Students who had avoided coming forward sometimes chose to enter the support pathway voluntarily once the risk of being screened became real.

Figure 5: Tips for a Smooth Random Drug Screening Set Up on Campus



#### 4.3.4 Ensuring Due Process for Disciplinary Action

BNU has found directions by government regulators to set up multiple committees dealing with different issues to be ineffective. Regulators typically operate with a one-size-fits-all approach and often have large public universities in mind when passing directives. Small universities like BNU neither have the human resource, nor the need to set up separate, issue-specific committees. Therefore, while meeting all formal stipulations, BNU chose to set up one umbrella committee to deal with all disciplinary issues. This allows the same group of faculty and staff members to retain institutional memory and identify patterns of behaviors that could help them make judicious decisions.

Getting the composition of BNU's umbrella Disciplinary Committee right was critical. We desired a mix of faculty and administrative staff, gender, and of departments naturally inclined to be empathetic (CCPW, Student Affairs) versus those whose job description tends to lean towards a disciplinarian inclination (Administration department, Registrar Office). The rationale was that the fairest hearing in such sensitive cases would occur if both the empathetic and enforcement-oriented voices were present alongside neutral faculty members. After some deliberation, a student representative was left out of the committee, instead asking the executive director of the Office of Student Affairs to represent the student view for fear of breach of confidentiality in the early stages of the SUCP.

Each case that were referred to the Disciplinary Committee related to students who were caught using or peddling drugs. All those who voluntarily came forward were dealt with through the counseling arm and put on a recovery plan. The committee was clear about the zero tolerance for drugs but gave varied decisions based on the circumstances of the cases at hand, often taking a more lenient view than could have been conceived. In a handful of cases, however, even students in their final semesters were resuscitated based on the severity of the breach. All students had a right to appeal the decision before the vice chancellor. However, to give weight to the committee's proceedings, the vice chancellor limited his powers to only considering any new information that may have come up since the committee's hearing or entertaining appeals in cases where the original committee decision lacked consensus. Meanwhile, without disclosing names, the vice chancellor mentioned any drug-related decisions by the committee in his weekly video messages to the BNU community. There could have been no clearer signal of the

seriousness of the management and the costs of recalcitrance for substance users and peddlers. The transparency, fairness, and rigor of the disciplinary process has ensured the absence of even a single legal challenge to the committee's decisions.

Equally important was insulating this process from external influence. Predictably, pressures emerged, particularly in the early stages, with individuals exercising influence in society by virtue of their background or official positions reaching out to request (demand) reversal of university decisions against specific students involved in substance-related cases. The vice chancellor entertained no side approaches on any undecided case. He had issued a blanket instruction to the disciplinary committee members and all other relevant colleagues that any external attempt to influence outcomes, bypass procedures, or seek preferential treatment should be refused outright and redirected to him in case the demand persisted. This stance gave BNU staff handling these matters the needed confidence and cover.

#### 4.3.5 Calibrating Intensity of Enforcement across SUCP Phases

Unlike the other pillars of the SUCP, the intensity and visibility of enforcement ought to be calibrated in various phases of an SUCP. The most visible, high intensity enforcement protocols are required in the initial phases of the program. This is a time when the leadership has conveyed the institution's commitment to a zero-drug policy and emphasized the centrality of support and empathy as the principal anchor of the effort. As the SUCP becomes socialized and accepted by the university community and visible enforcement measures have managed to curtail free access and use of substances, enforcement efforts need to incrementally retreat to the background. Public reminders of consequences for breaches should also be reduced while saturating SUCP-linked communication with messages about support and options for constructive engagement. Throughout, on- and off-campus vigilance in effect remains as stringent and comprehensive, ensuring zero drug supply and use, but the need for visible displays of deterrence-focused tools and verbal reminders decreases because the costs for breaking the rules should have become part of the university's sub-conscious culture. At BNU, we followed this arc, with public stress on enforcement renewed only momentarily at the beginning of each academic year for the benefit of the new students joining the university.

Table 2: Progression of SUCP Components Over Time

Intensity Over Time			
<b>Empathy</b>	High	High	High
<b>Constructive Outlets</b>	High	High	High
<b>Enforcement</b>	High	Medium	Low
<b>Leadership Communication</b>	High	Stable	Periodic

# CONFIDENTIALITY

Apart from sincere will and commitment of the university management, confidentiality is the only other factor whose breach can by itself lead to failure of the SUCP. It is being highlighted separately here given its importance.

Confidentiality is the cornerstone of mental health practice, but its application becomes complex when intersecting with academic governance and legal obligations. Building and sustaining trust between students and the counselor was an uphill task, particularly in an environment where skepticism toward institutional assurances about reprieve for substance users was inevitable. Confidentiality was therefore treated not as a procedural formality, but as an institutional principle. Only the necessary individuals had access to information related to SUCP, and no single person – including the vice chancellor – had a complete view of all cases. Information was shared strictly on a need-to-know basis, carefully calibrated to enable action without unnecessary exposure. The information flow was deliberately structured around three roles: the counselor, the general manager for administration, and the vice chancellor. While the counselor and administration shared necessary operational information, the vice chancellor inserted himself at the center, creating an intentional buffer. Information that did not need to pass directly between CCPW and the administration (or any other department) was routed to him instead, without either party being formally informed of this intermediary role. At the same time, the vice chancellor made it explicit that he did not wish to be briefed on individual student cases. The counselor retained full discretion to decide if and when he needed to be informed. Confidentiality was also one key reason the vice chancellor recused himself from routine Disciplinary Committee proceedings, instead fully empowering the Committee to adjudicate all drug-related cases.

BNU's Deans' Council and Management Committee, the two-apex consultative and decision-making bodies, which typically operate through open debate and collective decision making, were also treated differently with regard to the anti-drug campaign. The vice chancellor requested a carefully-considered exception; only high-level updates were shared, sufficient to reinforce institutional resolve and signal progress, but never to compromise case-level confidentiality. Members of the Deans' Council and Management Committee remained fully supportive of this approach throughout.

As the university management's seriousness about the SUCP became clear, overwhelming majority of the students also became supportive and many wanted to help. While students who voluntarily came forward to provide information about drug use and individuals involved – mostly out of concern for

a friend in need of help – were entertained, neither were they pushed to do so, nor were they rewarded for it. No student (or faculty and staff) was ever asked to act as an informant. In fact, even when students offered, the administration politely declined.

Moreover, a formal avenue was created for the management of each academic school to be able to report any possible mental health risks or substance use to the counselor. However, they were given no visibility on the counselor's handling of the cases. Where the need for student privacy conflicted with accountability or duty-of-care concerns, information was shared, but only when absolutely necessary and only with those whose involvement was essential.

Finally, we were extremely conscious of the need for data secrecy. Counselor records were maintained through a combination of hard copies and restricted-access spreadsheets housed within the CCPW. Access was tightly controlled and no one except the counselor could authorize information sharing. While BNU has otherwise reduced its paper usage drastically in line with its green campus certification by WWF, we did not immediately digitize counseling records. The transition was delayed deliberately and is now being pursued. It will only be completed when we are fully confident about data security.

There was no major breach of information throughout the SUCP's implementation. Minor procedural slipups did occur. While none resulted in information leaks, they highlighted an important lesson: confidentiality protocols are not always intuitive. Faculty and staff who were involved in specific conversations due to duty-of-care requirements needed conscious orientation on how to handle sensitive student information — what to share, how to communicate it, whom to include in the correspondence, and whom not to confide in. Even students who were part of the SUCP had to be constantly reminded of the confidentiality of information they knew about others seeking support. Over time, these lessons reinforced the need for continuous education and development of confidentiality norms across the institution.

The rigor of the SUCP's internal coordination and information management was not without cost. At times, the layered protocols, information sharing firewalls, documentation standards, approval processes, and need for coordination introduced delays that were frustrating in cases requiring swift intervention. However, bypassing protocols would have undermined accountability, increased the risk of information leakage, and weakened the very trust the program depended on.

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One of the most reassuring aspects for me was the strong emphasis on maintaining complete anonymity, which created a safe and respectful environment where I felt comfortable being honest about my experiences.

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# KEY TAKEAWAYS FROM BNU'S SUCP EXPERIENCE

## 1. Empathy-First Approach, but with a Balance

Universities must recognize that substance use is rarely about indulgence alone. For many students, it reflects maladaptive coping in response to stress, trauma, or social dislocation. Treating such behavior as moral failure not only undermines recovery but entrenches stigma and silence.

Substance use in higher education institutions cannot be addressed through isolated policies or symbolic enforcement. It demands a student-centered, trauma-informed, and institution-wide response that recognizes substance use as a complex human behavior shaped by psychological vulnerability, social context, and institutional culture. A trauma-informed approach requires embedding basic mental health literacy into orientation, curriculum touch-points, and faculty and staff training so that distress can be recognized early and responded to with empathy rather than discipline only.

Effective university responses must be centered on simultaneous investment in empathy and support; constructive outlets to provide a sense of belonging; and judicious but strict enforcement of a zero-tolerance-for-drugs policy. The overarching objective is not episodic control but sustained cultural transformation, which is achieved only when empathy, constructive engagement, and enforcement operate in tandem. Enforcement without active support and engagement leaves a vacuum that boredom, alienation, and unmanaged stress readily fill. Sustainable impact emerges when firm boundaries are paired with opportunities that offer students purpose, belonging, and legitimate relief from academic and emotional pressure.

BNU's experience demonstrated that governance need not be a binary choice between permissiveness and punishment. By combining amnesty for help-seeking students with strict accountability for violations, the university operationalized a dual-track model that preserved trust while enforcing boundaries. This coexistence of care and consequence proved essential in encouraging early disclosure without normalizing harmful behavior.

## 2. Provide Incentives Rather than Forcing Participation

Institutions cannot force students to join the SUCP with the intention of reversing their attachment to substance use by simply moralizing the problem. Instead, by embedding compassion, responsibility, and recovery in the institutional messaging, BNU managed to weaken stigma and strengthened help-seeking behavior. This narrative shift was not rhetorical — it was practically reinforced by offering amnesty to students who came forward. The incentive and positive reinforcement — rather than pure moral persuasion or disciplinary warnings — were critical in the SUCP's early success. This approach also had a multiplier effect: when students believed that seeking help would not automatically trigger punishment or public exposure, they voluntarily offered information about substance use on campus, which in turn helped the university strategize better on how to intervene more meaningfully.

## 3. SUCP's Professional Scaffolding

SUCP was anchored in professional mental health practice. Standardized assessments, therapeutic interventions, trauma-informed care, and referral mechanisms ensured that responses were evidence-based rather than ad hoc. Moreover, the counseling program adopted a 360-degree approach, which was necessary for sustained change in individuals, and by extension collectively for the university. Students were supported from identification to intervention and eventually through follow-ups; every step was defined and structured.

## 4. Individualized Interventions

One-size-fits-all solutions do not work. Effective programs blend universal prevention with flexible, individualized responses tailored to varying levels of vulnerability and risk. This is one reason that mass profiling and general categorization (problematic versus safe) of students does not help — apart from its negative consequences for the university community's trust in the SUCP's intent.

Not only in terms of the nature of the intervention, but institutions must also be careful to design service availability around actual student help-seeking patterns rather than administrative schedules and convenience. At BNU, service availability did not initially align with these patterns, particularly during peak stress periods such as examinations.

This temporal mismatch complicated timely in-house support and underscored the importance of understanding student needs before designing service availability.

Daily operational timings further complicated support delivery. The CCPW operated during standard working hours, yet many students struggling with substance use became available only after their academic commitments ended later in the day. This limited support precisely when students were most reachable, but extending counseling hours or scaling staff capacity during peak periods proved operationally challenging.

## 5. Constructive Outlets and Student Empowerment

BNU's experience underscored that enforcement without engagement leaves a vacuum. Both unstructured free time and excessively compressed academic schedules were identified as risk factors for substance use, driven by boredom on the one hand and stress on the other. By revitalizing student societies, extending sports infrastructure, expanding innovation platforms, and reclaiming campus evenings as structured communal time, BNU reduced exposure to risk while offering legitimate relief. However, it is worth stressing that co- and extracurricular activities should not be artificially promoted specifically to support students struggling with substance use. Such an approach risks creating fresh stigmas and deterring those we want to help from joining these activities. Better outcomes can be achieved by promoting constructive outlets as a necessary ingredient of the overall campus experience and encouraging all students to participate without necessarily singling out those the SUCP is seeking to help.

Moreover, the importance of peer involvement in creating positive engagement cannot be overstated. Peer-led structures, whether through mentorship, societies, or informal leadership played a critical role in reducing stigma; students were found to be more willing to trust non-judgmental support from within their own communities. Rather than relying only on formal support-seeking channels, peer networks must be mobilized as positive avenues for support, early signaling, and stigma reduction.

Ultimately, the goal of creating such opportunities for students is to address the recurring vulnerability created by absence of belonging and voice. Student empowerment matters. Rather than replicating hierarchical student governance structures, BNU prioritized direct empowerment through its

dedicated e-portal to enable two-way communication, grievance redressal, and access to the university leadership. The psychological impact of being heard without fear of reprisal proved transformative. While not easily scalable, this model offers a powerful lesson for university leaders grappling with how best to cater to the expectations of Gen-Z.

## **6. Judicious Enforcement**

While the empathy and support pillar of the SUCP led the way, the importance of enforcement measures cannot be ignored. Publicly-announced, heightened vigilance altered the perceived costs of substance use among students. Meanwhile, layered surveillance, environmental redesign, and random drug screening created credible oversight. Students who previously believed they could engage in drugs without consequence were compelled to reassess their choices.

Deterrence must be pursued without humiliation. Enforcement would never have worked if it compromised individual dignity and confidentiality. Early identification proved most effective when screening, policy clarity, and voluntary anonymous reporting mechanisms were framed as preventive safeguards rather than instruments of suspicion. This allowed administrative enforcement to operate as a stabilizing force rather than a source of fear. Crucially, it permitted the university management to implement a strict enforcement strategy without creating commotion among the student body.

Through our experience, we learned that enforcement must be based on accurate understanding of the campus and substance supply and use dynamics. Once determined, enforcement had to be steadfast, without discrimination, and pursued till it managed to reduce the prevalence of drugs. If these conditions are met, even the toughest enforcement policies can be maintained without significant pushback from the university community since they will recognize it as a sincere and transparent effort to benefit the victims of substance use and the institution's reputation. Such buy in is essential. Without it, we would have been unlikely to convince the BNU community of the necessity of extending our effective jurisdiction beyond formal campus boundaries. And without doing so, we would have been unable to tackle off-campus dynamics that were directly shaping on-campus risk patterns.

## **7. Curating Stakeholders Carefully**

The SUCP sought to establish a carefully coordinated, cross-functional system that brought students, faculty and staff, families, mental health professionals and service providers, and law enforcement partners into aligned roles. This required a holistic strategy that balanced compassion with accountability and prevention with credible deterrence. A SUCP is unlikely to succeed without creating this integrated network of stakeholders, each playing their own part while the university management ensures synergies among them such that the intended outcome can be pursued with the least amount of disruption and in the most empathetic way possible.

Involving families in specific student cases ultimately strengthened recovery and relapse prevention while respecting student autonomy and confidentiality. The approach acknowledged that students do not exist in isolation and that sustained recovery often requires repairing communication gaps beyond campus boundaries. That said, involvement of families must differ from case to case. Where family stresses may have caused or intensified substance use, pulling in the main source of anxiety could have a negative effect.

## **8. Importance of Data Analysis in Decision Making**

Data and analysis-based decision making turned out to be key for efficient prioritization and focused interventions. Starting from the initial data to understand the profile of BNU students who might be involved or vulnerable, continuous data monitoring proved indispensable. Tracking trends, identifying anomalies, and feeding insights back into program design enabled more targeted and adaptive interventions across all three pillars of the SUCP. Hard data and its analysis allowed us to pursue a targeted approach that did not disrupt the larger BNU community. It also helped us to develop a granular understanding of campus dynamics – knowing where risks clustered, how access pathways functioned, and which student spaces were most vulnerable –, which was needed to confront drug supply networks. By systematically mapping the drug ecosystem through observation and data, we understood the need to collaborate with law enforcement agencies to target peddling and external supply chains while insulating vulnerable users from criminalization. This calibrated distinction between students in need of care and actors sustaining the market proved critical to maintaining institutional legitimacy and student trust.

## 9. Resource Needs

BNU's experience suggests that while resource constraints are real, the financial and infrastructural demands of building a functional substance use response system are often overstated. Admittedly, the university management had not initially fully thought through the potential monetary costs of sustaining the SUCP. Some of the enforcement-related expenses required to increase campus vigilance and tools like drug screening incurred non-trivial costs. Resource constraints did limit the scope and scale of such interventions. And yet, progress was achieved less through large expenditures and more through internal coordination, phased sequencing, and targeted investments. We believe our program fared better because we were forced to achieve careful prioritization, adaptive decision making, and constant balancing between ambition and feasibility. This also highlights a broader lesson: meaningful progress does not require perfect conditions or prohibitively large budgets. In practice, accessibility, professional credibility, and flexibility of counseling services mattered more than scale, suggesting that the resource demand of building an effective institutional response is frequently overstated when compared to the costs of inaction.

Resources, however, were important in another respect. Institutions should anticipate affordability bottlenecks in external referral pathways for students struggling with substance use. Although BNU is sometimes regarded as an elite private university, a large proportion of our students rely on grants and scholarships. They are as, if not more, vulnerable to falling in the trap of drug suppliers, sometimes even simply as a means to meet their financial costs. Cost-prohibitive psychiatric and long-term treatment options constrain the range of viable referrals for such individuals, highlighting the need for universities to proactively map financially-accessible treatment partners early on in the program design. BNU had overlooked this aspect initially.

## 10. Leadership and Passion

Leadership matters. Institutional resolve, especially when it involves reputational risk, is a decisive factor in whether reforms remain performative or become transformative. Clear political will from the top enables consistency and insulates interventions from competing priorities or unnecessary pressures or influence. BNU's most consequential step was not technical, it was political.

The decision to pursue a zero-drug agenda to its logical conclusion signaled seriousness, irreversibility, and ownership. Without this, no downstream intervention would have sustained. Where full alignment from a university's governing bodies and senior leadership is absent, institutions should reconsider their readiness to launch a SUCP.

Passion among the core team is another necessary ingredient. BNU's success would not have been possible if the core team, and more specifically the two individuals responsible for leading the technical aspects of the program, believed they were merely meeting their job descriptions. Both the counselor and the general manager for administration saw this as a passion project and exhibited a true labor-of-love outlook every step of the way. Any university leadership choosing to take on the problem of substance use must begin by creating such a small, fully dedicated and passionate group of individuals to lead the way. A large, well-resourced core team is often seen as necessarily better than a small, focused one, but in this case, the requirement for a well-aligned and dedicated team and overwhelming concerns about confidentiality led us in the opposite direction.

Finally, university leaders and key executors of the program must recognize that there are genuine institutional as well as personal risks involved in implementing a SUCP. BNU's administration had to not only deal with pressure to protect students but also direct threats to personal safety on occasion. Necessary precautions must be put in place in advance because the drug mafia will inevitably pushback.

## 11. Clear and Transparent Communication

Communication stood out as a crucial ingredient of the SUCP. From the very onset, the leadership has to take control in sending a clear and unequivocal message and keep rehearsing it as needed to ensure continued buy in from the entire university community. The content of the messaging would naturally be adjusted as the program progresses, with relative emphasis on empathy versus enforcement changing over time. Institutional messaging proved most durable when anchored in clear legal and safety principles rather than moral or ethical debates that can quickly become polarized or inconclusive. Departmental and individual communication below the leadership level is equally critical. Messages from the CCPW and the administration department

naturally differed in substance, tone, and tenor but they continued to align with the overall spirit of the SUCP. Individual faculty and staff in position of responsibility must also ensure the same, or desist from opining or providing information to colleagues or students if they are not involved in the program.

## 12. Succeeding while Keeping an Eye on the Larger Picture

While essential for the well-being of a student body, taking measures to curb drugs is never the primary responsibility of universities. Tertiary educational institutions are ultimately meant to offer mentorship and wisdom and groom individuals to become successful adults. This requires an environment of trust between students and faculty. Nothing a university should do, even in terms of curbing substance use, should ever breach this fundamental bond even if it may offer greater short-term gains for the SUCP. Making this mistake will result in the collapse of the very social contract higher education learning is built upon.

Moreover, BNU's effort proved that even a matter as sensitive as mental health and psychological issues can be handled without affecting academic rigor and institutional discipline. The leadership was clear from the beginning that it would not allow its SUCP to be misused by students seeking unnecessary accommodation. Reform was never allowed to dilute core academic standards and protocols.

Table 3: Key Ingredients of SUCP's Three Pillars

### Empathy & Support

**Core idea:** Treat substance use as a health and well-being issue, not a moral failure.

- Amnesty-based pathways for early help-seeking
- Confidential, trauma-informed counselling embedded institutionally
- Individualized recovery plans (not one-size-fits-all sanctions)
- Family involvement as recovery support, not enforcement
- Professional mental-health scaffolding guiding decisions

**Replication tip:** Start with clear amnesty rules, trained counsellor(s), and confidentiality protocols — scale later.

### Constructive Outlets

**Core idea:** Reduce risk by filling time with purpose, connection, and agency.

- Expanded societies, clubs, and inter-school engagement
- Evening campus life through sports, fitness, and recreation
- Curated social events with cultural value and safety controls
- Peer mentorship and academic support during high-stress periods
- Innovation, entrepreneurship, and creative platforms.
- Direct student voice via direct access to leadership

**Replication tip:** Co-curriculars are preventive infrastructure, not optional extras.

### Enforcement

**Core idea:** Create credible boundaries without humiliation or fear.

- Zero-tolerance policy, consistently and visibly enforced
- Layered campus vigilance (surveillance, patrols, access control)
- Random drug screening for early detection, not punishment
- Clear separation between users (care) and peddlers (sanctions)
- Targeted collaboration with law enforcement to disrupt supply
- Transparent disciplinary process with institutional memory

**Replication tip:** Enforcement must be predictable, dignified, and paired with care to retain legitimacy.

# NEXT STEPS

BNU formally declared itself a drug-free campus in 2025. Yet, any institution that takes up the challenge of addressing substance use must accept the difficult reality that complete eradication is neither feasible nor a useful target. This is inherently an ongoing endeavor that must evolve with changing patterns of use, availability, and student demographics. The goal must remain to build a responsive institutional architecture focused on prevention, early detection, timely intervention, and maximum rehabilitation. Sustained progress depends on maintaining momentum and institutional commitment over time. The next phase of BNU's SUCP is focused on stabilization and institutionalization — ensuring that systems endure beyond individual leadership cycles or crisis moments. Moreover, we are focused on achieving deeper institutional cultural transformation beyond the SUCP.

## **1. Going Beyond Substance Use: Emphasizing a Broader Culture of Empathy**

As the SUCP began to address the substance use crisis, the university management simultaneously sought to identify means to address deeper mental health issues. The most common meta-level stressors that stand out among the BNU body – these can reasonably be assumed to be applicable across Pakistani universities – are linked to family relations, history of childhood abuse, peer relationships, and power relationships (faculty and staff versus students). The effects of the latter two, which more specifically amount to traumatic peer relationships or mismanaged romantic relations and perceived lack of sensitivity to student concerns by faculty and staff can potentially be diluted by ushering in a deeper culture of empathy and shared understanding of interpersonal boundaries at the university.

In the coming months, BNU will be investing heavily in orientation and motivational sessions on creating positive interpersonal relationships — both intra- (among students) and inter- (between faculty and staff and students) generation. The disconnect in inter-generational communication between Boomers, Gen-X and Millennial faculty and Gen-Z students has emerged as a universal phenomenon that leads to stress and anxiety for the entire university community. Constant orientation and reinforcement of the need to better understand each other's communication styles and expectations can have a greater-than-assumed positive impact on the campus culture.

Moreover, targeted assertiveness and boundary-setting workshops will be designed to equip students with tools to navigate social pressure, communicate needs confidently, and make the right autonomous choices — particularly in contexts where substance use is normalized. Equally, students will be oriented to expected boundaries in student-mentor relationships they must respect for optimal engagement with faculty and staff.

## **2. Promoting a Culture of Celebration**

BNU's experience highlighted the need to complement risk-reduction efforts with stronger positive reinforcement. Preventive ecosystems are strengthened not only by deterring harmful behavior but also by amplifying aspirational pathways that students are motivated to emulate. The university has not had a common practice of formally celebrating the many monumental achievements of its community. While early phases of the SUCP necessarily focused on containment of the substance use problem, the university recognized that it needed to do more to visibly celebrate student achievement and resilience and promote constructive role models. A concerted effort is now underway to rectify this weakness, with formal award ceremonies and the Wall of Honor being initial steps in this direction. Over time, positive signaling in a variety of ways is expected to reinforce belonging, purpose, and healthy forms of recognition — factors that are themselves protective against risk behaviors.

## **3. Expanding Counseling and the Peer Support Network**

While the university benefits tremendously from the presence of professional psychologists among our faculty at the Institute of Psychology, we realize the need to invest in increasing the strength of the CCPW. In addition, recognizing that crises do not conform to office hours, BNU also aims to establish 24/7 helpline options for its community. These may be staffed by trained first responders and supervised peer volunteers from among our senior psychology students or through third-party services.

An expanded CCPW is required to cater to the increasing size of the student body and growing demand for counselor services because of the university's encouragement for students to benefit from this support mechanism. Another reason for greater anticipated future demand is the university's desire to expand the SUCP's focus to its employees. While being open to supporting faculty and staff, the program has thus far been focused overwhelmingly on student well-being. Faculty and staff are exposed to the same societal stresses

and personal struggles that often go unnoticed or unattended. These concerns are often exacerbated by unreasonable student behaviors. It is equally the university's responsibility to provide the best care and support to our faculty and staff to ensure their mental well-being.

## **4. Mental Health Literacy and Safe Spaces**

The next phase will place renewed emphasis on mental health literacy as a prevention infrastructure. Education will be delivered through both structured and creative formats, combining workshops with student-friendly content such as infographics, short videos, testimonials, and myth-busting campaigns. Complementing this, BNU will continue to facilitate small-group sessions focused on substance use, peer pressure, experimentation, coping strategies, and harm-reduction. These non-judgmental forums will encourage reflection, dialogue, and practical decision-making skills under professional facilitation.

In parallel, BNU plans to further strengthen peer involvement through a Student Well-being Ambassador Program. Selected students (who may or may not be part of the Well-being Society) will receive training in active listening, peer referral, and basic psychological first aid. Working closely with the CCPW, these ambassadors will help normalize help-seeking behavior, co-create awareness campaigns, and foster a campus culture rooted in shared responsibility. We will be specifically focusing on our hostels, with Well-being Ambassadors being designated among hostilities to provide a ready option for resident students to connect with.

BNU is also actively considering the establishment of designated calm rooms and mindfulness studios on campus to provide safe physical spaces dedicated to stress management. These sensory-friendly environments will offer quiet, structured spaces for emotional regulation, grounding, and stress recovery. Managed by the CCPW, they will also serve as practical training sites for psychology students learning applied mindfulness and crisis-management techniques.

The university will simultaneously increase the frequency of expert-led conversations and lived-experience dialogues, bringing even more voices of recovery, addiction professionals, and mental-health practitioners into campus discourse. These engagements aim to further humanize substance use discussions and replace fear-based narratives with empathy and evidence.

## 5. Strengthening Early Detection

BNU's Institute of Psychology will lead a series of professional trainings for our faculty members in early identification of mental health issues or unusual stress among students to facilitate early intervention and support through the SUCP. Separately, the CCPW will arrange specific trainings for faculty, student ambassadors, and members of the CRT in psychological first aid and substance-use red-flag identification.

Simultaneously, the university is working to enhance its already-multilayered academic advising and mentorship framework, especially for students who may be struggling academically or in terms of cultural assimilation. The university is ensuring that all students receive some form of personalized academic advising at their respective schools, with specific attention to students who have deviated from their degree roadmaps due to poor performance. The Peer Mentorship Program provides another avenue for students to seek academic support and handholding from senior students. Yet another layer of mentoring has been piloted in Fall 2025 for students who join BNU from diverse and underprivileged backgrounds and inevitably face initial adjustment challenges. Faculty and staff volunteers act as mentors and regularly engage with such students in small groups in a casual setting to address any vulnerabilities and ensure their healthy assimilation. Although the various nodes of mentorship are not SUCP-specific, as more members of the BNU community get trained in early detection and psychological crisis management, these mentor-mentee interactions are expected to help in preventing the drivers of substance use from emerging in the first place.

# ADOPTING BNU'S MODEL AT OTHER UNIVERSITIES

Addressing substance use requires universities to move beyond symbolic compliance and embrace responsibility for the full human experience of their students. For institutions considering this path, our message is that this work is demanding, imperfect, and at times exhausting, but it is profoundly worthwhile. The cost of inaction is far greater than the discomfort of engagement. BNU's experience demonstrates that meaningful change does not require perfection, unlimited resources, or flawless outcomes. It requires resolve, empathy, and the willingness to stay the course. Universities that choose to act do more than reduce harm. They shape lives, restore trust, and reaffirm the purpose of higher education itself, not merely to produce graduates, but to nurture capable, resilient, and responsible human beings.

BNU's model is replicable, but it must be adapted in a context-specific and sensitive manner. Larger universities who need to operate at a much greater scale than BNU must consider the following to ensure functional equivalence with our experience.

- Communication and student empowerment: Strategic communication is a major operational effort. While the objective and intensity of communication by any university can mimic BNU's experience, the content will have to be chosen according to the culture and context of the particular campus to ensure receptivity among the university community. Strategic communication outcomes will be optimized only if it empowers students to communicate back. Especially in larger settings where voices can be diluted in a sea of noise, students must have formal mechanisms of being heard and they must perceive the university management's offer to entertain their concerns to be sincere. BNU's e-portal mechanism provides a possible framework to achieve this although it may be unrealistic for vice chancellors of larger universities to offer direct access to students. However, the principle of offering access to decision makers is transferable and could possibly be operationalized at the level of deans or heads of departments.
- Target the institutional center of gravity first: Large universities should begin with a structured diagnostic to identify high-impact physical clusters and student segments where intervention will generate the strongest multiplier effect. Prioritizing these nodes early on can accelerate the desired cultural shift and make broader drug-control objectives more attainable. Accurate data gathering will be essential to achieve this.

- Customize support and enforcement: Urban versus rural settings, residential density, and student diversity require tailored responses rather than uniform templates. Universities should take the lesson that no one-size-fits-all to heart and customize responses. Larger universities may end up with different emphasis on the three pillars of the SUCP for different parts of the campus/different groups within the university community, etc.
- Decentralize action: Large universities may need to divide campuses into priority clusters (e.g., high-risk hostels, departments, or incoming cohorts) and sequence interventions accordingly. They should scale gradually, learning from outcomes of initial interventions, rather than following rigid top-down mandates that are to be executed universally at the same time.
- Create parallel teams: Regardless of the size of the student body, universities should establish a small central coordinating unit to maintain coherence, accountability, and confidentiality. The core team can be supported by multiple sub-teams operating simultaneously to maintain coverage at scale.
- Ensure adequate financial resources: Even though resources did not stand out as a make or break for our effort, in retrospect, BNU's effort was grossly under-resourced. Universities must make a realistic cost assessment to support the three pillars of the SUCP to suit their size, context and needs and ensure assured budget availability for the duration of the program.
- Plan counseling capacity realistically: Unlike BNU, which benefited from the presence of an in-house Institute of Psychology, many universities will need to invest in a far larger pool of trained counselors and external partnerships for referrals to meet the demand at scale.
- Be realistic about the risks involved: At the end of the day, it will all boil down to leadership. Taking a SUCP to its logical conclusion requires clarity of purpose, passion, dedication, and an assumption of personal and institutional (reputational) risk. Unlike BNU, many universities confront additional challenges of student politics, unions, and internal law and order issues. Leaders in such universities must be cognizant of and create a plan to mitigate such risks as far as possible before initiating the SUCP.

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Personally, going through the process made me appreciate the initiative even more. It showed that BNU is not just focused on academics, but also on shaping responsible individuals and fostering a disciplined, supportive space for growth.

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- Seek support from government regulators: Substance-use control on campuses has risen in government priority in recent years. New policies, such as official sanction for on-campus drug screening and new dedicated departments or initiatives by federal and provincial governments offer an opportunity for universities to receive tangible and moral support from the public sector. This ought to be utilized liberally. At the same time, regulators must understand that their typically dictatorial edicts applied uniformly – and often abruptly – to all universities regardless of their specific contexts is neither prudent nor helpful. Regulators should only communicate intended outcomes and broad guidelines for any suggested effort, including ones relevant to elimination of drugs from campuses, leaving specific interventions, approaches and timelines to achieve them to the universities.

# CONCLUSION

Universities are not merely sites of instruction; they are living ecosystems. Culture, governance, physical space, and social life all shape a university community's behavior. Institutions that invest in empowerment, transparency, and connection reduce the structural conditions that enable substance use — even before enforcement becomes necessary.

Building and sustaining an SUCP often felt like swimming upstream, each current pushing back harder than the last. BNU was confronting multiple challenges simultaneously: institutional inertia, fear of judgment and repercussions, reluctance to seek help, financial constraints, and the emotional weight of responsibility. There were moments when progress felt imperceptible, motivation dipped, data was discouraging, and relapse threatened to eclipse adherence.

Yet, the measure of success revealed itself in quieter ways. It appeared in students who chose to ask for help, faculty members who referred struggling students despite discomfort, peers who challenged stigma by starting difficult conversations, and leadership that refused to look the other way. These small acts accumulated into a cascading effect that slowly but decisively shifted campus culture. Transformation was real. Students who recovered often returned, not as cases but as advocates. They became informal ambassadors of the program, mentoring others, normalizing help-seeking, and quietly extending the impact far beyond any policy could mandate. Some came back before graduation simply to say thank you — to acknowledge that the university did not give up on them when it would have been easier to do so.

BNU's SUCP became more than an institutional milestone; it evolved into a lived process shaped by experience, conviction, and sustained commitment. Achieving this demanded patience, compassion, and the ability to help alleviate the suffering of others without becoming consumed by it. But the alternatives of retreating into authoritarianism or choosing inaction were far harder to accept. The SUCP was ultimately driven by a belief in the transformative power of support; every struggle carries a story worth hearing, and every student is an individual worth fighting for.

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### Client Disclosure and Consent Form

Welcome to the Center for Counseling and Psychological Well-being (CCPW) at Beaconhouse National University (BNU). Our counseling services aim to support individuals in gaining insight, developing coping strategies, and improving overall well-being in a safe, respectful, and confidential space. All members of the BNU community, including students, faculty, and staff may seek counseling for many reasons, including managing stress, navigating personal or professional challenges, exploring thoughts and emotions, or addressing interpersonal, academic, or work-related concerns.

Counseling works best when there is clear communication and mutual understanding. This form explains what clients can expect from counseling, the limits of confidentiality, professional boundaries, and the rights and responsibilities of individuals receiving counseling services. Please read it carefully and feel free to ask any questions before signing.

#### Confidentiality

Information shared during counseling sessions is treated as confidential and will not be disclosed outside the counseling setting without the client's permission. However, there are some exceptions where counselors may be legally or ethically required to disclose the necessary information:

- If there is a serious risk of harm to you or someone else, or if you disclose plans to commit a crime or dangerous act.
- If there is suspected or disclosed abuse involving a child, elderly person, or someone with a disability.
- If there are repeated violations of university policies or involvement in serious misconduct, and the university formally requests information (only the necessary and relevant details will be shared).

- Counseling records are kept for therapeutic purposes and are not intended for medico-legal use. However, in **rare** cases, information may be disclosed *if* required by law or court order.

In some cases, counselors may also consult with other mental health professionals (without revealing client's identity) for professional guidance to ensure the best support possible. In situations where safety is a concern, appropriate authorities or an emergency contact may be notified if necessary.

### **Services Offered**

Counseling services include individual sessions tailored to each client's needs. Counselors may draw from a variety of evidence-based therapeutic approaches, such as Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), Emotion-Focused Therapy (EFT), and Acceptance and Commitment Therapy (ACT). All sessions are delivered with a trauma-informed approach, ensuring emotional safety and respect for each client's individual experiences.

### **Professional Boundaries**

Counselors maintain clear professional boundaries to ensure that counseling remains a safe and focused space. These boundaries include:

- Avoiding dual relationships such as friendships, romantic involvement, or social engagements during or after counseling.
- Limiting communication to official and professional channels (e.g., scheduled sessions, university email, or telephone).
- Maintaining respectful and brief interactions if encountered in campus or public settings.
- Not accepting personal gifts or engaging in personal social media connections.
- Avoiding physical contact unless therapeutically appropriate and with explicit consent.

These boundaries help ensure a safe, ethical, and focused counseling experience.

### **Limitations of Online/Remote Counseling (if applicable)**

In the case of remote or online sessions, clients are expected to ensure a quiet and private space. While efforts are made to ensure confidentiality, the university is not responsible for technical failures or privacy breaches arising from third-party platforms.

### **Missed Appointments/Cancellation Policy**

If a client is unable to attend a scheduled session, they are required to inform the counselor at least 24 hours in advance. Repeated missed appointments without prior notice or a request to reschedule may result in the appointment slot being offered to another client.

### **Client's Rights and Responsibilities**

Individuals receiving counseling at BNU have the right to:

- Receive confidential, respectful and non-discriminatory care.
- Be informed and actively involved in the counseling process.
- Request a referral to a different professional, or discontinue counseling at any time.

Clients are expected to:

- Attend sessions on time.
- Be honest and open to the counseling process.
- Inform their counselor if they are feeling unsafe or experiencing a crisis.
- Respect the counseling boundaries and communicate concerns.

### **Acknowledgement and Informed Consent:**

I understand that the counseling services provided are intended for support, guidance, and personal development and are **not** a substitute for clinical treatment, diagnosis, or medical care. If at any point I require emergency or psychiatric support, I understand that I will be referred to appropriate services. If I am referred to an external provider, service, or organization, I understand that the CCPW at BNU does not assume responsibility for the practices, quality, or outcomes of these third-party services. A referral does not constitute endorsement. By signing below, I acknowledge that:

- Participation in counseling is voluntary
- I may terminate these services at any time
- I may need to discuss material of an upsetting nature as part of exploring personal concerns and working toward meaningful change
- I understand it cannot be guaranteed that I will feel better after completion of treatment

I, \_\_\_\_\_ (Name), from \_\_\_\_\_ (Department & Semester), am acknowledging that I have read, understood, and agree to participate in counseling under these conditions. I voluntarily release the Counselors providing services through counseling services at Beaconhouse National University and the University itself from liability for outcomes related to counseling sessions.

**Signature:** \_\_\_\_\_

**Student Registration/Employee ID No.:** \_\_\_\_\_

**Date of Signing:** \_\_\_\_\_



# Beaconhouse National University

*Center for Counseling and Psychological Well-being*

13 Km, Off Thokar Niazbeg, Raiwind Road, Lahore-53700, Pakistan.

Tel: +92-42-38100156 ext. 713

Email: [campuscounselor@bnu.edu.pk](mailto:campuscounselor@bnu.edu.pk) | Web: [www.bnu.edu.pk](http://www.bnu.edu.pk)

Student Registration/Employee ID No.: \_\_\_\_\_

Date of Signing: \_\_\_\_\_

## **Informed Consent for Random Drug Screening**

I \_\_\_\_\_, hereby consent to submit to a drug or alcohol test and to furnish a sample of my urine, breath, and/or blood for analysis, as shall be determined by Beaconhouse National University (BNU) as part of the Substance Use Control Program. I further authorize and give full permission to BNU and/or its authorized personnel to send the specimen or specimens so collected to a laboratory for a screening and/or confirmation test for the presence of any prohibited substances under the policy, and for the laboratory or other testing facility to release any and all documentation relating to such test to Beaconhouse National University (BNU). I further agree to and hereby authorize the release of the results of said tests to Beaconhouse National University (BNU).

I also agree to be fully informed about my rights to confidentiality and privacy related to such cases. I further agree that BNU, its employees, counselors, and authorized personnel are free from any liability arising in whole or part, out of the collection of specimens, testing, and use of the information from said testing in connection with the BNU's consideration of my role within the University. I further agree that a reproduced copy of this consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

**Signature:** \_\_\_\_\_



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## Pre-Counseling Form for Students

This information is required primarily for the understanding of your needs so that a suitable time is arranged for you to meet a counselor. Remember the information you give will be treated as confidential.

### Form No:

### TO BE COMPLETED BY THE STUDENT:

Student's Name: .....

Male  Female

BNU Registration No.: .....

Father's Name: .....

Contact No. (In case of Emergency):

.....

Personal Mobile No.: .....

E-mail: .....

Present Postal Address: .....

.....

### SCHOOL

(PLEASE ✓ THE APPROPRIATE BOX):

SVAD	RHSA	SLASS	SMC	SCIT	SE	SMS	IP

Program and Semester: .....

Date of Birth: .....

Who prompted you to seek counseling?

Self - referral  Friend  Family  Instructor  Other (Specify)

### Briefly describe your reasons for approaching the Center for Counseling and Psychological Well-being (CCPW)

Is there anything else you think the Counselor should know?

### Please share all your free/available time slots for the appointment:

Days	Free Slots
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	

### Confidentiality

All interactions with BNU's CCPW, including scheduling of or attendance at the appointments, content of your sessions, progress in counseling, and your records are confidential. No record of counseling is contained in any academic, educational, or job placement file. There are certain exceptions to confidentiality, one of which is when the counselor believes that a student may be at risk of harming themselves or others. For more details about the terms of services, rights and confidentiality, please read the Client Disclosure and Consent Form.

**Signature:** \_\_\_\_\_

**Student Registration No:** \_\_\_\_\_

**Date of Signing:** \_\_\_\_\_

**For CCPW Use only:**

Date Form Received: \_\_\_\_\_



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## Student Safety Acknowledgement and Transfer of Care Form

Student Name: \_\_\_\_\_

School and Department: \_\_\_\_\_

Student Registration No: \_\_\_\_\_

Date: \_\_\_\_\_

Time of Departure: \_\_\_\_\_

Guardian/Responsible Adult Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### Summary of Concerns:

The student has been identified as experiencing significant mental health challenges that may pose a risk to their well-being. It has been determined that the student should be under the supervision of a responsible adult.

### Transfer of Responsibility:

I, the undersigned guardian, acknowledge that I have been informed of the student's current emotional and mental state and the concerns shared during the meeting with the Counselor. I understand that the student is currently at high risk and requires ongoing supervision and support to ensure their safety. I agree to assume full responsibility for the student's care upon their release from the University's supervision.

I agree to remain with the student and ensure they are not left alone until further appropriate care is arranged, as advised by the Counselor.

### Safety Plan:

1. Ensure the student is not left alone for long periods of time.
2. Schedule an appointment with a psychiatrist within the next 48 hours.
3. Maintain open communication with the University's counseling center for ongoing support.
4. Clear student's environment of any harmful objects/weapons and all medication.

### Acknowledgement:

By signing below, I confirm that I have read and understood the information provided above. I agree to the terms outlined and commit to following the safety plan to support the student's well-being.

### Guardian's Signature:

\_\_\_\_\_

Date: \_\_\_\_\_

### Counselor's Signature:

\_\_\_\_\_

Date: \_\_\_\_\_

# ABOUT THE AUTHORS

## **Moeed Yusuf**

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