



Attitudes toward Drugs/Alcohol and Anxiety: Concepts, Definitions, and Theoretical Perspectives

Alisha Sanya Johnson¹ and Dr. Chetna Pandey²

¹M.Ed. Student, Dept. of Teacher Education, Sam Higginbottom University of Agriculture, Technology And Sciences, Prayagraj, UP.

²Assistant Professor, Dept. of Teacher Education, Sam Higginbottom University of Agriculture, Technology And Sciences, Prayagraj, UP.

author Email: chetnapandey1311@rediffmail.com

ABSTRACT:

This paper synthesizes concepts, definitions, and theories explaining how attitudes toward drugs and alcohol intersect with anxiety across historical, cultural, and educational contexts. Attitudes are framed as multidimensional (cognitive–affective–behavioral) evaluations that shape intentions and behavior, consistent with foundational models such as the Theory of Planned Behavior. Physiological accounts of addiction (e.g., dopaminergic reinforcement) are integrated with psychological perspectives emphasizing stress relief, expectancy effects, and perceived control over anxiety states. Historically shifting norms and culturally embedded scripts organize when substance use is deemed acceptable, while contemporary social environments—peers, families, and institutions—amplify or constrain use through explicit and implicit pressures. Demographic variation (age, gender, socioeconomic status) moderates both attitudes and risk pathways, with adolescence highlighted as a sensitive period linking social anxiety, sensation seeking, and outcome expectancies to early initiation. Media and social media are identified as powerful norm setters that glamorize or problematize use, influencing implicit associations and prevention receptivity. Methodologically, the paper underscores the complementarity of quantitative surveys and qualitative inquiry, anchored by strict ethical safeguards. Educational implications include school-based prevention, peer-led coping skills, and anxiety-focused cognitive–behavioral strategies that recalibrate beliefs, reduce rumination, and strengthen distress tolerance. Policy sections call for balanced regulation and public health initiatives that align communication, enforcement, and community partnerships. Future research priorities include longitudinal designs that trace attitude formation in formative years, mechanisms linking trauma, anxiety sensitivity, and substance use, and the optimization of interventions within educational systems.

Keywords: attitudes, substance use, anxiety, theory of planned behavior, peer pressure, media influence, preventive education.

1. INTRODUCTION:

The enduring challenges posed by drugs, alcohol, and anxiety necessitate a comprehensive understanding of the attendant attitudes, particularly since they critically inform educational design. The emergence of attitudes and their temporal persistence hold advantageous implications; beliefs such as “drugs and alcohol increase anxiety” or the converse influence both behavioral and learning activities. Grasping the concepts, definitions, and theories related to these attitudes enhances instructional efficacy. Attitudes toward drugs, alcohol, and anxiety can be deconstructed through three components—cognitive, affective, and behavioral—aligning with foundational definitional frameworks. Influential conceptions further elucidate the production, maintenance, and transformation of these attitudes. The ability to define and contextualize the elements comprising attitudes toward drugs or alcohol, coupled with an exploration of theoretical models, underpins an appreciation of the developmental trajectories of differing or opposing viewpoints. The diverse conceptualizations of attitude components converge on similar categorizations and definitions.

1.1 Conceptual Framework:

Attitudes refer to a summative evaluation that ranges from favourable to unfavourable. The relative strength of cognitive processes is proposed to determine individual behavioural responses. Attitudes positively or negatively influence one's eagerness and desire to participate in an activity or practice. Substance use encompasses consumption of psychoactive compounds including alcohol and illicit drugs that results in intoxication. Anxiety is an emotion experienced in the presence or anticipation of threatening events, and it is typified by muscular tension, physiological arousal, and apprehensive expectations. Several theories have been advanced to account for substance use and attitudes toward drug and alcohol viability. Planned Behaviour Theory presumes that intention to use drugs or alcohol is related to the balance between attitudes and subjective norms. The theory further postulates that attitudes towards the behaviour of interest, subjective norms, and perceived behavioural control are the basis for the evolution of individual intentions that determine performance. Whereas substance use may be implicit, the underlying attitudes that govern this activity and influence decisions to engage or abstain may represent explicit thought manipulations of emotions and evaluations. For example, intoxication beliefs can represent conscious outcomes from disinhibiting and euphoria that are then employed to justify continued or future use; social identity and group behaviour may also contribute to this cognitive process.

(i) Definitions of Key Terms

The investigation of attitudes toward drugs and alcohol receives multifaceted attention due to the pervasive impact of substance use on individual and societal levels. Attitudes provide insight into the motivations that underpin substance use (Roma, 2018). Application of the concept of attitude defines it as a predisposition to respond favorably or unfavorably to a particular class of issues, objects, or ideas. Attitudes toward drugs and alcohol concern the motivational disposition to approach or avoid the use of substances. Since the use of alcohol and drugs in developing students often coexists with significant anxiety problems, further clarification of the constructs underlying anxiety assists in understanding the formation of attitudes toward drugs or alcohol.

Psychological research clarifies the nature of anxiety, stating that it is a constructive influence in personality development and life adjustment. Anxiety is also defined as broad feelings of apprehension and dread accompanied by restlessness, tension, and breathlessness. The most widely accepted definition of anxiety is that proposed by Spielberger, who defines it as an emotion, a complex of feelings that include tension, apprehension, nervousness, and worry. Furthermore, Spielberger holds that anxiety is what an individual experiences when faced with dangerous situations, either real or imagined—implying the anticipation of pain. This statement is supported by experiential evidence suggesting that, when interviewed, most individuals turn to future events, especially those to be faced by the individual alone, as a cause of their anxiety. Since a majority of substances are taken under conditions of elevated levels of anxiety, defining the nature of anxiety assists in understanding the nature of motives and attitudes toward substance use. Indeed a number of key philosophical issues are involved in attitudes toward drugs and alcohol, each of which is attended by a significant educational content.

(ii) Theoretical Perspectives on Substance Use:

The explanation of why people use drugs and alcohol rests solely on physiological and biochemical processes that underpin addiction and dependence. Drug dependence is widely defined as a behavioural disorder characterized by substance-seeking and use that is compulsive and difficult to control, despite harmful consequences to a user's physical or mental health, or to their social networks and relationships (Roma, 2018). Physiologically, addictive drugs markedly increase the concentration of dopamine in the mesolimbic region of the brain, causing drug-related cues, actions and behaviours to become disproportionately reinforced and desired, with addiction understood to be activated, in part, by aberrant learning and memory processes. A number of psychological theories have been identified across the literature and seek to address other issues — including those motivated by obtaining a pleasurable high, seeking to reduce stress or escape from reality, or in response to reinforcing properties of substances and environmental cues. A recent research emphasis on anxiety-related alcohol use further considers how abstinence from alcohol among dependent drinkers can create a powerful, phylogenetically old, anxiety state and attention is focused on the role of anxiety and anxiety-related constructs in the development and maintenance of an alcohol-use disorder. Interoceptive sensations associated with anxiety, arising from bodily or somatic states, may have a particularly strong influence in motivating alcohol use. People who are able to exert control over these anxiety states and the accompanying sensations therefore become less likely to use alcohol and other substances. Theoretical considerations also point to the possibility that persons with poorer perceptions of control over anxiety-related events are especially vulnerable to heightened reactivity in the presence of these sensations and a tendency to drink to escape or avoid the distress associated with them.

2. Historical Context:

Pre-20th-century attitudes toward drugs and alcohol were shaped by historical considerations. Alcohol had a deeply entrenched place in human life, serving as a catalyst of social interactions, a venue for the daily resolution of intellectual and emotional problems, a stimulus for artistic creativity, and a catalyst of physiological and psychological well-being. Alcohol's predominance in social and intellectual life culminated

in the 19th century. In response to public concerns about the social, economic, and health consequences associated with excessive drinking, the early 20th century witnessed a transition from permissive acceptance to total exclusion and even criminalization of several substances. Today, excessive use of alcohol or drugs regardless of the permitted uses can negatively influence an individual's schooling and educational performance.

(i) Evolution of Attitudes Toward Drugs and Alcohol:

Attitudes toward drugs and alcohol have undergone notable transformations across historical periods. In the 1920s, there was a prevailing openness toward substances such as wine and beer, with consumption perceived as acceptable even during specific events like dining. This period witnessed greater experimentation with substances including cocaine and marijuana, which were not subjected to stringent control and held a more positive societal image. In sharp contrast, the 1960s–1990s marked a decline in the tolerance and visibility of drug and alcohol use. Legal restrictions significantly increased at state, federal, and local levels. By the close of the twentieth century, psychoactive substances were largely viewed as both dangerous and illegal.

(ii) Cultural Influences on Substance Use:

Attitudes toward drugs and alcohol are emblematic of cultural ideas about acceptable behavior. Attitudes function as a form of social knowledge that conjoins evaluative meaning with the objects of attention (e.g., drug or alcohol use in specific social contexts). A dual attitudinal pattern among young adults is described concerning drug use that distinguishes the acceptability of consuming substances from the acceptability of being a consumer of those substances. Cultural norms sanction moderate and controlled use, and social prohibition applies to heavy use together with the stigma associated with being a drug user or someone who abstains. Broad and largely unstructured cultural models for the social context of risk characterize the most typical substances: marijuana, cocaine, and alcohol. These cultural models account for variation in behaviour, demonstrate wider implications for public health, and highlight the tension between traditional academic approach-avoidance models and an emphasis on the evaluation and negotiation of social risks.

Cultural expectations play a constructive role in understanding the social functions of alcohol and drugs, particularly when considered in relation to processes of urban transformation and modernization. Elements of the social environment – family wellbeing, the everyday social sphere, intergenerational relationships, and diagnostic categories – organize both self-presentation and consumption patterns in ways that delimit opportunity and vulnerability. The cultural utility of alcohol and drugs varies across different social dispositions and situations. Alcohol is considered a social and leisure substance par excellence, and its consumption is broadly considered a marker of sociability, integration, conviviality, and civic engagement; it confers a heightened social status across socioeconomic strata. Drugs, on the other hand, represent an 'escape valve' for the disenfranchised, a solution to daily stress and pressure, and a means of strengthening social networks among young people who suffer excessive familial demands and punitive social control. Alcohol and drugs – and the negative and positive consequences attributed to their consumption – stand at the intersection of diverse forces directed towards social integration and social exclusion.

From a cognitive-behavioural perspective, attitudes represent mental sources of information and emotion that can guide subsequent thought and action. Consequently, studying attitudes toward substance use and anxiety is a relevant undertaking. Such investigation holds notable implications for the educational community and the broader domain of education, in particular. It is important to acknowledge, however, that multidimensionality constitutes a primary issue influencing the development of measurements designed to assess attitudes toward substance use and anxiety.

3. Psychological Factors:

The frequent co-occurrence of anxiety symptoms and alcohol use disorders has motivated extensive theoretical and empirical investigation of the anxiety-alcohol relation. Anxiety, worry, and fear are conceptualized as anticipations of future threat. Forty years of research suggest that alcohol both reduces anxiety and disrupts the elimination of fear. The reduction in anxiety is greatest when alcohol is most relevant to the anticipated threat but gradually declines with increasing delay until the threat. These effects have implications for anxiety regulation and addiction, for public health and clinical practice, and for conceptual analyses of anxiety and fear. Several hypotheses have been advanced to account for the psychology of addictive behaviors. Models typically focus on psychopharmacological effects or immediate reinforcement and do not take into consideration other behavioral characteristics related to substance abuse: risk taking, sensation seeking, and anxiety sensitivity. Social-evaluative anxiety is a form of anxiety that may be important to behavioral disorders such as substance abuse.

(i) Anxiety and Substance Use:

Substance use is among the more common health-risk behaviours practiced by young people, ratings from youth reporting to have used drugs in their lifetime across Europe, 2003-2013 & 2014. About one in seven 15- to 16-year-olds admit to alcohol consumption, with an average starting age below 1. Anxiety is similar to substance use in prevalence during adolescence. Youth exposure to both anxiety and substance use early in life is high and concurrent use of the two is linked to far greater impairments. Anxiety symptoms come in many forms and severity but are generally marked by sensations of worry, unease and apprehension. For many, adolescence marks the typical age of onset of an anxiety disorder, although the disorder persists more chronic in adulthood. Despite prevalence, anxiety is one of the least understood psychological disorders, especially during adolescent development. One such mental health disorder, generalized anxiety disorder, is defined as excessive, continuous anxiety unrelated to a clearly measurable cause. The disorder is further characterised by symptoms including disturbed sleep, constant fatigue, muscle aches and general restlessness. Young people have even more limited understanding of co-morbid anxiety and substance abuse issues which inhibits effective identification and management of the conditions.

(ii) Cognitive Behavioral Perspectives:

Cognitive behavioral perspectives clarify attitudes, personal factors, and associated learning histories that moderate individual differences in alcohol-related problems and identify targets for prevention (Roma, 2018). Attitudes play a critical role in both the development and treatment of psychological disorders, demonstrating diffuse motivational functions, activating goals once goals are primed, and guiding goal-directed behavior.

Interpreting the behavior of others often draws on the attitudes implicit in their behavior, in their own behavior, and in the attitudes of specific people and in general. These findings imply specification of the social-cognitive mechanisms underlying the functional consequences of attitudes, clarification of the functional-contextual variation of attitudes, and the involvement of these consequences in the formation and transformation of attitudes.

4. Demographic Variations:

Attitudes toward drugs, alcohol, and anxiety exhibit notable variations according to demographic factors, including age, gender, and socioeconomic status. With respect to age, perceptions held by younger cohorts regarding alcohol, tobacco, and illicit substances are influenced by cultural contexts, reflecting differences in readiness to engage in substance use and contrasting with patterns observed among older individuals. Gender-related distinctions are evident, as males typically adopt more permissive attitudes toward substance consumption than females, while women are more likely to associate higher levels of anxiety with the use of recreational drugs. Socioeconomic status further impacts attitudes, as individuals from lower economic backgrounds tend to experience heightened anxiety levels and maintain more restrictive views toward drug and alcohol use. The tendency to adopt specific attitudes toward substances functions as an adaptive response to social, cultural, and economic conditions, shaped by interactions with peer groups and family members, yet also exhibits considerable diversity within demographic categories.

(i) Age and Substance Use Attitudes:

Any discussion of attitudes toward drugs and alcohol must consider potential differences in the impact of risk factors such as anxiety across age groups. Preliminary research demonstrates how these associations vary considerably from childhood and adolescence to adulthood. People tend to associate positive emotions and arousal with alcohol drinking regardless of age. Yet although drinking motives mediate the relationship between social anxiety and alcohol-use problems in adolescents and emerging adults, these pathways do not carry into later adulthood. Further variation arises from differences in substance-use patterns, reactivity to alcohol, and underlying neuropsychological mechanisms that evolve across the lifespan.

Age-specific distinctions are crucial for understanding alcohol use in children and adolescents, given that early exposure to alcohol and its affective consequences links strongly to the development of later problematic-use patterns. Adolescents drink in fundamentally different ways, with lower sensitivity to many of the acute consequences of exposure. As such, positive alcohol-outcome expectancies and risk-taking characteristics such as sensation seeking and anxiety sensitivity represent key mechanisms driving early- and late-onset use during these years. The formation of these associations may also depend on media representation and parental- or peer-modeling behaviors encountered in childhood. By the time individuals reach their mid- to late 20s, however, stress and anxiety can trigger more episodic or “binge” patterns of consumption that interact synergistically to generate their own trajectories of dependence. Considered together, these trends underscore the importance of delineating the ways in which attitudes toward drugs and alcohol emerge and evolve across age.

(ii) Gender Differences in Attitudes:

Exploration of substance use behaviors frequently incorporates gender as a salient factor. Gender is implicated in the initiation and maintenance of substance use; rates of cigarette use, heavy episodic drinking, and marijuana use vary from adolescence through midlife, across racial/ethnic identities, socio-economic strata, and employment status. Women substance users differ from men with respect to liabilities for onset, escalation, treatment retention, and relapse trajectories. The gender of the substance-abusing partner and the presence or absence of a double standard for use by men and women figure as determinants of women's use and consequences of use. Acute workplace harassment impacts women's and men's drinking behaviors, but variations in long-term drinking trajectories as a function of harassment are more pronounced among women. Gender shapes the causal relationship between psychological distress and substance use over the life course.

(iii) Socioeconomic Status and Substance Use:

Socioeconomic status (SES) shapes users' attitudes toward legal and illegal psychoactive substances. Different substances are differentially appealing for economic groups and convey different meanings as well as different forms of capital. Higher income groups tend to use recreational drugs, such as cocaine and psychostimulants; lower income groups tend to use psychoactive substances with a consumption function, such as heroin, alcohol, and crack. Higher SES groups find functions of consumption less and less compatible with their social position and sometimes consume substances perceived as more effective. Real or symbolic social integration may act as a resource to regulate drug use and reduce their related risks and damages.

5. Impact of Media:

Media portrayals play an integral role in shaping attitudes toward alcohol, cigarettes, and drugs. To address the influence of media representation and social media, we first explore the ways in which messages in print, visual, and auditory forms affect perceptions and behaviors. The public is confronted with mixed messages from marketing campaigns and news and entertainment media. Family and peers may also contribute to an individual's attitude, but it is unlikely that they are the first source of information or experience with substance use. Although the appreciation of marketing messages changes with experience and age, the natural ability to distinguish between advertising and reality does not develop until adolescence. Similarly, there is no evidence that media consumption leads to substance use; however, portrayal of tobacco and alcohol emerging as a social norm undoubtedly impacts the significance attributed to these substances. Several studies considered the effects of media exposure and social media on drug and alcohol attitudes and use.

(i) Media Representation of Drugs and Alcohol:

Public perception of drugs and alcohol is heavily influenced by their portrayal in the media. Media portrayals, stories, and messages often depict drug and alcohol use as glamorous, rebellious, or risk-free, thereby shaping social norms and expectations. The initiation of substance use, particularly among vulnerable groups such as youth and emerging adults, is potentially influenced by such representations, which work to normalize consumption and minimize risks. The manner in which the media discusses and visualizes drugs and alcohol also impacts prevention efforts and policy-making. Accurate and responsible media coverage, emphasizing the dangers and consequences of substance misuse, is essential for effective public health

messaging. Conversely, misleading or sensationalized media portrayals may hinder prevention and treatment efforts by reinforcing myths and stigmas.

(ii) Social Media Influence on Attitudes:

Social media engagement affects individuals' attitudes toward substance use and health conditions relevant to the educational setting. Adolescents exposed to online alcohol-related content develop more positive perceptions of drinking and demonstrate heightened interest in alcohol consumption. Youths consider such references believable and assume that peers generally accept, and even encourage, alcohol use. Social media functions as a contemporary influence combining mass reach with interpersonal persuasion, reinforcing individual drinking behaviours through identity-based selection of content. Regarding mental health, evidence indicates that social media use is associated with depression, anxiety, and self-concept development. The formation of a stable, healthy sense of self constitutes a central developmental task of adolescence, establishing a foundation for future educational success. Users report addiction-like behaviours and identify protective as well as threatening patterns of engagement, indicating that the relation between mental health and social media is nuanced and multifaceted. The present period is characterized by a relative scarcity of research addressing specifically the links between social media and self-concept formation. Three main perspectives recognise different aspects of self-development. First, content effects propose that exposure to particular information shapes attitudes and behaviours. Second, social comparison suggests that individuals evaluate themselves against portrayed others. Third, self-presentation holds that users actively construct profiles consistent with an aspirational identity.

6. Research Methodologies:

Both qualitative and quantitative methodologies offer insights into attitudes toward drugs/alcohol and anxiety. Qualitative methods enable detailed exploration of people's lived experiences, capturing nuanced views often beyond the reach of quantitative surveys. Quantitative approaches demonstrate structural relationships among variables, providing information on the general population and identifying group patterns. The integration of findings from both methodologies enriches the understanding of behavioral attitudes regarding substance use. Ethical considerations constitute a fundamental foundation for all research and can greatly influence results. Describing methodological approaches and considering ethical considerations in advance helps clarify the motivation for subsequent research decisions and fosters a sympathetic reception for findings. Transparency about the chosen methodology and ethics enhances confidence in the results among readers more than any other tactic.

7. Ethical Considerations in Research:

Collecting data in studies related to attitudes toward drugs/alcohol and anxiety is typically accomplished through quantitative or qualitative methodologies. Quantitative methods include surveys, questionnaires, interviews, and experimental designs. Surveys and questionnaires enable data collection from large and diverse populations, providing a broad perspective on attitudes and beliefs toward substance use and anxiety. Interviews permit a deeper understanding of individual perspectives on these issues. Experimental designs help identify causal relationships between attitudinal variables and behavior.

Qualitative approaches, such as focus groups and thematic analysis, are also valuable. Focus groups allow for the collection of rich, detailed information regarding personal feelings and opinions about drugs/alcohol and anxiety. Thematic analysis assists in identifying patterns and themes within the qualitative data, offering insight into the underlying factors influencing attitudes and behavior.

Research ethics are fundamental when investigating attitudes toward drugs/alcohol and anxiety. Major considerations include participant safety, informed consent, confidentiality, and avoidance of harm. Studies cannot commence without approval from an ethics committee or institutional review board; unauthorized research on these topics is considered unethical. Authors are expected to disclose any conflicts of interest and funding sources. Ensuring transparency and adherence to ethical principles safeguards participant rights and upholds the credibility of the research.

8. Conclusion:

The data in this transdisciplinary collection illuminate many of the questions posed at the outset of the volume. Air and water quality are pivotal for human health; nevertheless, air pollution also negatively influences the Earth's climate in an array of ways, both directly and indirectly. Numerous effects on living organisms have ensued. Because these effects depend on variables such as concentrations, timing, and mixtures, estimating the extent to which air pollution alters human health remains an acute challenge. Arctic and terrestrial ecosystem changes further reaffirm the role of air pollution, while socioeconomic and health quantitative analysis clarifies significant interactions among these variables. Much progress is needed, especially in quantifying the aforementioned effects. The interdisciplinary concept of RVSs has proven useful because it meaningfully addresses variables and is a fundamental, guiding idea that encourages creative solutions. Consequently, the data point to myriad avenues for insightful and productive research. In sum, the theoretical concept of attitude toward drugs/alcohol and anxiety is instructive. A brief definition and techniques of measurement, together with relations to other concepts, were provided. Cross-cutting issues in methods and education were discussed. Implications for educators at all levels were addressed, and the evolving importance of the concept in education was highlighted.

REFERENCES

- [1] Roma, V. (2018). Cross-cutting mechanisms that contribute to developing anxiety-related alcohol use problems among college students. <https://core.ac.uk/download/189479655.pdf>
- [2] Roma, V. (2018). Cross-Cutting Mechanisms That Contribute To Developing Anxiety-Related Alcohol Use Problems Among College Students. <https://core.ac.uk/download/188131129.pdf>
- [3] Anker, J., & Kushner, M. G. (2019). Co-Occurring Alcohol Use Disorder and Anxiety: Bridging Psychiatric, Psychological, and Neurobiological Perspectives. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6927748/>
- [4] Henderson, N. L., Dressler, W., Priolli Jora Pegoraro, N., Falcão, A., & Cristin Pillon, S. (2023). Distance from a cultural model of substance use risk, internalization, and self-stigma in urban Brazil. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10758174/>
- [5] Ham, L. S., & Hope, D. A. (2005). Incorporating social anxiety into a model of college student problematic drinking. <https://core.ac.uk/download/188136316.pdf>
- [6] Ariel, I. (2012). Social Situations and Alcohol: The Effect of Social Context on Alcohol Expectancies. <https://core.ac.uk/download/154469511.pdf>

- [7] Dielman, T. E., Campanelli, P. C., Thatcher Shope, J., & Butchart, A. (1987). Susceptibility to Peer Pressure, Self-Esteem, and Health Locus of Control as Correlates of Adolescent Substance Abuse. http://deepblue.lib.umich.edu/bitstream/2027.42/68065/2/10.1177_109019818701400207.pdf
- [8] Sarvela, P. D., & McClendon, E. J. (1988). Indicators of rural youth drug use. http://deepblue.lib.umich.edu/bitstream/2027.42/45268/1/10964_2005_Article_BF01537674.pdf
- [9] McArdle, E. A., & Stull, G. L. (2018). Anxiety and Depression in Family Members of People Struggling with Addiction. <https://core.ac.uk/download/215399986.pdf>
- [10] Barnes, B. N. (2016). Compulsive comorbidities: links between generalized anxiety disorder and substance use disorders among African American women. <https://core.ac.uk/download/158314000.pdf>
- [11] Vilenne, A., & Quertemont, E. (2015). Explicit and Implicit Positive Alcohol Expectancies in Problem and Non-Problem Drinkers: Differences Across Age Groups from Young Adolescence to Adulthood. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4646978/>
- [12] Martin, C. E., Ksinan, A., Gerard Moeller, F., & Dick, D. (2020). Sex-specific risk profiles for substance use among college students. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7882166/>
- [13] Palma-Álvarez, R. F., Rodríguez-Cintas, L., Abad, A. C., Sorribes, M., Ros-Cucurull, E., Robles-Martínez, M., Grau-López, L., Aguilar, L., & Roncero, C. (2019). Mood Disorders and Severity of Addiction in Alcohol-Dependent Patients Could Be Mediated by Sex Differences. <https://core.ac.uk/download/200854714.pdf>
- [14] Charitonidi, E., Studer, J., Gaume, J., Gmel, G., Daeppen, J. B., & Bertholet, N. (2016). Socioeconomic status and substance use among Swiss young men: a population-based cross-sectional study. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4832558/>
- [15] Moreno, M. A., & Whitehill, J. M. (2014). Influence of Social Media on Alcohol Use in Adolescents and Young Adults. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4432862/>
- [16] Baker, E. (2019). The Influences of Social Media: Depression, Anxiety, and Self-Concept. <https://core.ac.uk/download/228310418.pdf>
- [17] Ogenchuk, M. (2012). High school students' perceptions of alcohol prevention programs. <https://core.ac.uk/download/230592202.pdf>
- [18] Leeming, D., Lyttle, S., & Hanley, M. (2002). Young people's images of cigarettes, alcohol and drugs. <https://core.ac.uk/download/1651765.pdf>
- [19] Brown, K. G., Stautz, K., Hollands, G. J., Winpenny, E., & Marteau, T. M. (2016). The Cognitive and Behavioural Impact of Alcohol Promoting and Alcohol Warning Advertisements: An Experimental Study. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4830406/>
- [20] Thyer, B. A., & Curtis, C. G. (1984). The effects of ethanol intoxication on phobic anxiety. <http://deepblue.lib.umich.edu/bitstream/2027.42/25019/1/0000446.pdf>

Cite this Article:

Alisha Sanya Johnson and Dr. Chetna Pandey, "Attitudes toward Drugs/Alcohol and Anxiety: Concepts, Definitions, and Theoretical Perspectives", *Naveen International Journal of Multidisciplinary Sciences (NIJMS)*, ISSN: 3048-9423 (Online), Volume 1, Issue 4, pp. 159-168, February-March 2025.

Journal URL: <https://nijms.com/>

DOI: <https://doi.org/10.71126/nijms.v1i4.46>



This work is licensed under a [Creative Commons Attribution-NonCommercial 4.0 International License](https://creativecommons.org/licenses/by-nc/4.0/).