College Substance Use: New Approaches to a Perennial Problem
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On October 17, 2017, national leaders in higher education, policy-making and substance use prevention and treatment convened to discuss the latest trends, challenges and innovations in preventing and addressing substance use on America’s college campuses. Hosted by the Mary Christie Foundation, the Hazelden Betty Ford Institute for Recovery Advocacy and the University of Maryland School of Public Health, the symposium was moderated by Kevin Kruger, Executive Director of NASPA, and New York Times best-selling author William Moyers, Vice President of Public Affairs and Community Relations for the Hazelden Betty Ford Foundation.

In his opening remarks, University System of Maryland Chancellor Robert Caret presented findings from a recent survey of higher education administrators that showed increased concern about the impacts of marijuana use on college students. The chancellor was followed by Dr. Jason Kilmer, the nation’s preeminent researcher on college marijuana use, whose presentation identified common myths that obscure the real risks of marijuana in the age of legalization.

The two panel discussions that followed provided views from sets of professionals for whom this issue is of utmost importance – 1) college presidents and 2) those on the front lines of addressing student substance use. The presidents panel which included Marty Meehan, JD (President, University of Massachusetts System), Kim Schatzel, PhD (President, Towson University), Wayne A.I. Frederick, MD (President, Howard University), Gregory Crawford, PhD (President, Miami University) and Tom Sullivan, JD (President, University of Vermont), shared their experiences and views on the challenges and opportunities ahead based on their unique perspectives as leaders. Following the conversation, the experts panel made up of Amelia Arria, PhD, Director of the Center on Young Adult Health and Development at
the University of Maryland School of Public Health and an Associate Professor with the university’s Department of Behavioral and Community Health, Timothy Rabolt, Director of Community Relations and Strategic Advancement for the Association of Recovery in Higher Education, Nance Roy, Ed.D., the Chief Clinical Officer at the Jed Foundation, and Nancy Young, PhD, Vice President for Student Affairs at the University of Maryland Baltimore County, discussed best practices and the need for evidence-based decision-making.

Given the known adverse impact of student substance use on academic engagement, health and safety, there is an urgent need to proactively and comprehensively address substance use and related problems on college campuses. This report summarizes the key takeaway messages from the symposium and calls for continuing dialogue, improvements in communication, and translation of research findings to assist higher education professionals toward this goal.

It is not an everyday occurrence that multiple college presidents and higher education leaders come together to discuss substance use and related problems among college students. The dialogue during the day highlighted the following challenging trends:

• Excessive drinking, including underage drinking, is a perennial concern and creates challenges for higher education – decreasing academic engagement as well as student health and safety.

• Substance use overlaps with sexual assault, hazing and decreased quality of life in the community.

• Perceived risk of marijuana is down.

• Many college administrators have seen problems associated with student marijuana use.

• Research on substance use is plentiful, our understanding is growing, but research does not always filter down to impact practice.

• Most campuses are engaged in a number of prevention activities, but schools are struggling to find the best approaches.

• Better internal communication is needed, as is communication with external partners.

• Partnerships with external stakeholders are essential.

• Implementation of evidence-based practices is the real challenge.
• More training is needed to select best practices, implement strategies and utilize data to guide planning.

• More showcasing of successful models would be beneficial.

• Substance use issues must not be ignored given the impact on student health, safety and success.

• Alumni, parents, faculty and community members all have a role to play.

• Wellness initiatives are growing in popularity
Advancing Prevention Efforts for Marijuana Use in a Changing Legal Climate

Changes to state marijuana laws, from medical use to outright legalization, have altered the way people perceive and talk about the drug. At the College Substance Use: New Approaches to a Perennial Problem symposium, Associate Professor of Psychiatry at the University of Washington’s Center for the Study of Health and Risk Behaviors Jason Kilmer gave a presentation that raised a number of red flags about a growing perception of reduced risk. Kilmer’s talk, "An Ounce of Prevention Has Never Weighed More: Advancing Prevention Efforts for Marijuana Use in a Changing Legal Climate" dispelled some of the myths increasingly attributed to marijuana: that it is "safer" than alcohol; "not addictive;" and "not a big deal."

Marijuana potency has changed. The concentration of the psychoactive component of marijuana, THC, has increased dramatically over the past few decades. Namely, samples seized by the Drug Enforcement Administration in 2012 had an average THC concentration of 12 percent, three times higher than in 1985 (3 percent). The most recent Marijuana Impact Report showed that the average THC content for one store in Seattle was 21.62 percent. Because our understanding of the effects of marijuana is based on studies of individuals who were using a lower-potency drug, the impacts of the high-potency marijuana available today are largely unknown. Unfortunately, all signs point to a direct relationship between higher-potency marijuana and addiction, mental illness and decreased academic achievement.

Cannabis use disorder is well documented, as is cannabis withdrawal. Just like any other form of addiction, cannabis use disorder is characterized by compulsive use despite experiencing negative consequences and other symptoms such as disruptions in social, oc-
Cupational and family functioning. Cannabis withdrawal symptoms include difficulty sleeping, anxiety, depressed mood, appetite problems and headaches—symptoms that, ironically, mirror the reasons people often cite for using marijuana.

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), marijuana was used in the past year by 12.6 percent of adolescents, 32.2 percent of young adults ages 18-25, and about one in 10 individuals who are 26 and older. Studies have shown there is a misperception that even more people use marijuana. This misperception could prompt initiation of use for people looking to fit in. It could also increase use for those already using, or could be a barrier to making a change for habitual users.

Marijuana also can interfere with the academic mission of colleges and universities, as it impacts cognitive functioning. Research consistently shows that the more people use marijuana, the more they experience decreases in attention, concentration and memory—effects that can persist for 28 days in daily users. Additional research shows that the more college students use marijuana, the more likely they are to skip classes, feel unmotivated about their academic pursuits and take longer to graduate (if they make it to graduation).

While more research is needed on the effects of marijuana (particularly new, higher-potency marijuana), it is important to keep prevention and intervention efforts moving forward to address emerging needs. To address marijuana use on campus, universities must correct misperceptions, educate faculty and students with scientific evidence, identify and support those struggling with substance use, enforce laws and policies, and involve parents, among others.
A survey released at the symposium revealed that a majority of college administrators said more students believe marijuana to be “safe,” drawing concern that changing national attitudes about marijuana might have downstream effects for college students. Administrators said the number of students with marijuana-related problems has either increased (37 percent) or stayed the same (32 percent), while almost none said such problems have lessened. And while they report a variety of negative impacts of marijuana use, and acknowledge the need to address the problem, they also reported dealing with gaps in information and policy.

The national survey of higher education officials was sponsored by the Mary Christie Foundation and the Hazelden Betty Ford Foundation in conjunction with the National Association of System Heads (NASH). The survey of 744 professionals in the fields of academic affairs, student affairs and student health was conducted by The MassINC Polling Group. The survey showed broad consensus among administrators that colleges can and should implement strategies to reduce marijuana use among college students, but relatively few administrators think their own campuses are putting much emphasis on the issue. Barriers to tackling the problem include lack of information about effective approaches, and limited coordination and training. The survey also found more awareness of the problem among officials on the front lines than among those in academic affairs or administrative roles.

Among the key findings:
• Seven in 10 administrators said the number of students with marijuana-related problems on campus had either increased (37 percent) or stayed the same (32 percent) over the past three years. A majority (54 percent) of respondents believe the number of students who perceive marijuana to be safe has increased over the past three years.

• A majority (55 percent) report marijuana use in college residence halls; 41 percent have observed academic problems related to marijuana use; and 36 percent have seen student mental health issues. Sixty-three percent agreed that students who use marijuana are more academically disengaged than non-users.

• Eight in 10 (79 percent) believe college campuses should implement policies and programs to effectively reduce marijuana use among college students, but only a third think their campus is putting a great deal (5 percent) or a fair amount (28 percent) of emphasis on preventing marijuana use right now.

• Majorities think a lack of resources, coordination and information presents barriers to successful marijuana prevention and enforcement on campus. Student opposition is also seen as a concern.

• There is a large gap in knowledge and perception of the issue between administrators on the frontlines of student services (e.g., those in health and wellness, prevention, residential life and campus safety) and those in administration and academic affairs. Majorities of the first group think that marijuana use is a serious problem on their campuses, while majorities of the latter group perceive it to be less of a problem.

• One way to address this gap could be to improve training and information sharing. Majorities of all types of administrators are interested in receiving training on how to handle various aspects of marijuana use among students, including impacts on student health, well-being and academic success.

• Administrators say marijuana is not treated as seriously as alcohol. Screening for marijuana use is less common than screening for alcohol, and administrators are split on whether marijuana causes more academic problems than drinking, and whether marijuana users also drink to excess.
Successes & Challenges

There have been many successes in the prevention of alcohol and other drug use on college campuses. Students are increasingly abstaining from substance use altogether, and the prevalence of "binge drinking" has slightly decreased. Culturally, there is growing attention to the importance of behavioral health, and an increased recognition of the need to intervene earlier on mental health issues.

Research in the area of alcohol and other drug (AOD) prevention is plentiful, with many studies identifying at-risk groups and protective factors. There are evidence-backed interventions at both the environmental and individual levels that have been shown to reduce excessive drinking and other forms of substance use among college students.

On campuses, the collegiate recovery movement is gaining traction. College presidents are making an unprecedented effort to be leaders in the prevention of substance use at their schools.

Challenges certainly exist. Excessive drinking is still the most prevalent behavioral health concern, and a substantial proportion of young adults are engaging in high-intensity drinking or consuming a number of drinks that exceeds the binge threshold. And while alcohol consumption among male students has decreased, female drinking patterns have remained more stable. Additionally, due in part to a decreased perception of risk, marijuana use is increasing among young adults. Nonmedical use of prescription drugs is also a concern, though that type of substance use is less common than marijuana and alcohol use.

A growing number of students with pre-existing mental health conditions – many of whom are on medications to treat those conditions
are entering college, too. And little guidance exists on campus regarding the potential adverse interactions of alcohol and other substances with psychiatric medications. For these students and others, the stigma associated with seeking help for mental and behavioral health issues is strong.

Implementation of best practices is a challenge. Evidence-based practices exist, and tools such as the College Alcohol Intervention Matrix (AIM) are designed to help schools choose appropriate interventions. However, these tools are not prescriptive, and implementation still requires serious planning by administrators who must also consider allocating new resources or shifting existing resources. Additionally, college health and student affairs professionals need routine training to effectively intervene with students who have behavioral health concerns. Myths about student substance use are abundant among students, administrators and parents. Beliefs such as the idea that marijuana is benign or safer than alcohol, that first year students are the ones at highest risk, or that issues with substance use disappear after graduation are pervasive and false.
There is growing interest in wellness throughout society and particularly on college campuses. Healthy eating, exercise, meditation and yoga have surged in popularity over the past few years as young people are becoming more aware of the connection between these activities and their sense of well-being. Although we are not aware of any hard evidence, there is an assumption that those who are more proactive about their overall health might be less likely to participate in excessive drinking. Wellness dorms and residential learning environments that promote health and wellness and often ban substances, are becoming popular across the country.

At the University of Vermont, the Wellness launched in 2015 with 110 students, has grown to 1,165 students in a little over two years. The growth is student-driven, indicating its appeal as a sought-after lifestyle choice that appeals to a majority of students rather than a college-based strategy for high-risk behaviors.

At the University of Vermont, the Wellness Environment (WE) program launched in 2015 with 110 students and grew to 1,165 students in a little over two years. The growth is student-driven, indicating its appeal as a sought-after lifestyle choice that appeals to a majority of students.

The WE program combines four pillars of wellness – fitness, mindfulness, nutrition and relationship health – in a residential community where students are given incentives to pursue positive behaviors. Students sign on to the program quite literally. WE students sign their names to a code of conduct outlining what is expected of them in terms of behavior and accountability. The residence halls are substance-free, though in contrast to sober homes, WE students are only expected to refrain from drinking or smoking while in the resi-
dence – the premise being: the healthier their home environment, the healthier their choices will be away from the residence.

WE students are also required to take a three-credit course called "Healthy Brains/Healthy Bodies," which teaches the reciprocal relationship between brains and young adult behaviors, including the negative impacts of alcohol and other substance use. As the WE program’s popularity indicates, the combination of healthy lifestyle environments with evidence-based prevention education, is one of the most promising long-term strategies in combating substance use, primarily because it is positive, incentive-based and student-driven.
Recovery communities and related support services are another promising and growing movement on college campuses. Young people in recovery from substance use disorders should not have to choose between going to college and staying sober. Collegiate recovery programs eliminate the need for that difficult choice, helping students pursue their education and sustain their recovery simultaneously by creating an environment that is not abstinence-hostile and instead validates and supports substance-free college life.

Collegiate recovery programs (CRPs) are diverse with respect to their leadership, organizational structure, resources and programmatic priorities. Some colleges, for example, provide substance-free housing units. Others don’t have sober housing but still foster a community that provides students with opportunities to meet and engage with others who are in recovery or abstinent for other reasons.

Connecting socially and emotionally in a "protected" space is key for students in recovery. Advocacy is a big part of the collegiate recovery movement, too. Many young people in recovery are sharing about their experiences openly, demonstrating a contagious commitment to both helping one another and carrying a healthy message to others – all while having healthy fun and excelling in school. That spirit of advocacy and enthusiastic outreach makes it easier for others on campus to get involved and helps make conversations with peers, professors, staff, faculty and health care providers more comfortable. The result is that students are able to have an authentic collegiate experience without feeling shame, stigma or isolation.

Collegiate recovery started in 1977 with one school. A decade later, there were three CRPs. In recent years, that number has grown to more than 180 across the United States, with more on the way.
Research has demonstrated that collegiate recovery programs are effective and worthwhile investments, with CRP students performing better academically than the average student. CRPs and their substance-free activities also benefit the entire school, serving as a visible counterweight to unhealthy campus activities and as an informative beacon of hope for the significant minority of students who will discover they need help at some point in life.

The key to the popularity and growth of CRPs may be their ability to emphasize and impact standard pillars of student success, such as academics, internship opportunities, research and study abroad.
In his first year as President of Miami University in Ohio in 2016, Gregory Crawford was faced with significant challenges. During one of the first weekends of the school year, a large number of students were transported to the hospital for alcohol poisoning, predominantly students who were involved in the Greek rush process. Then, in January of 2017, a first-year student died in her residence hall from alcohol poisoning.

Miami University has utilized the NIAAA College Alcohol Intervention Matrix (AIM) tool, choosing several strategies after analyzing which ones would be most appropriate in the school’s Oxford, Ohio setting. Miami has pursued strong relationships with local service establishments, including bars and restaurants, working with establishments on dealing with fake IDs and refusing service to underage students and those who are intoxicated. While the interests and incentives of alcohol license holders and the University may often differ, maintaining open communication and partnership is vital.

Miami has also established a strong collaboration with the local community, including local government and law enforcement. Local police have increased party patrols, especially foot and bike patrols to ensure student safety in areas that cars cannot reach.

Miami has also used targeted interventions for high risk groups such as students affiliated with Greek organizations. The school has worked with Greek leaders to prohibit spirits and require party checks at fraternities. President Crawford has personally engaged with Greek leaders, in the hopes of reinforcing the core values, including personal responsibility, that are part of their codes. Miami
also offers alternative, substance free activities, like Late Night Mi-
ami.

President Crawford is adamant that enforcement of alcohol policies 
be strong, clear and consistent. He believes that enforcement is most 
effective when an understanding of the rules and expectations is 
widely spread among the student body. President Crawford and Miami 
University have made great strides to combat drug and alcohol use, 
though he acknowledges that the work of prevention is hard, and the 
results are slow.

Wayne A.I. Frederick, Howard University

Howard University maintains a dry campus policy that is strictly 
adhered to at all school functions, including fundraising events.
President Frederick believes strongly that students model the behav-
ior that they see, and that reinforcing the message of responsible, 
appropriate behavior is critical.

Additionally, the Howard University offices of Residence Life and 
Student Services work together to hold students accountable for 
violating University policy and provide education on alcohol and 
drug abuse and its implications on health.

Howard has tried to engage alumni in their alcohol and drug use 
prevention efforts. Often, alumni have expectations for the school to 
be the same as their contemporary experience of it. Because alumni 
do not want to contribute to or be associated with an institution 
where alcohol, drug and mental health issues are overlooked and stu-
dent outcomes (academic and post-graduation) are suboptimal, they 
can be convinced of the need to devote resources towards prevention. 
President Frederick has made it a priority to educate alumni on the 
current issues in student behavioral health, and to update them as of-
ten as possible, challenging them to be connected with the university 
in a palpable way. HU Ideas is a new program that brings alumni 
back to campus to give talks on current topics, engaging them with 
students and showing them the return on their investments.

One of the major challenges for Howard University is that the school 
is located in a heavily populated metropolitan area. An open campus 
has created concerns about who and what students have access to but 
those concerns must be tempered with respecting student autonomy
and privacy.

*Marty Meehan, University of Massachusetts*

As the head of a university system, President Marty Meehan’s role differs from that of other presidents, as he leads multiple campuses with distinct geographies and student demographics.

With the pressure on university presidents to raise money, few have been willing to speak publicly about these important, sometimes controversial issues. As President, Marty Meehan has worked to bring the issue of substance use and its consequences to the attention of students, faculty, and staff and views issues that arise on campus as critical teachable moments.

It is a reality that the state and the federal government are increasingly holding public universities accountable for retention rates. President Meehan, in his communication with these and other stakeholders, has stressed the connection between excessive drinking, drug use and decreases in student wellness generally, with lowered retention and decreased student success. President Meehan would like to see an integration of efforts to increase retention with efforts to promote wellness, of which substance use prevention is a large part. He believes in a proactive, comprehensive "wellness" approach, addressing the issues in every department, from student affairs to student health services to athletics. Increasing student wellness at the University of Massachusetts has become part of evaluating its overall success.

*Kim Schatzel, Towson University*

Towson University officials are particularly concerned about high-intensity drinking practices such as pre-gaming, drinking multiple shots in one sitting, and playing drinking games. These practices are a main driver for the number of students transported to the hospital for serious alcohol intoxication. President Schatzel believes strongly in collaborative partnerships that bring together public and private entities.

Towson University is a member institution of the Maryland Col-
laborative, a group of fifteen universities that collectively address substance use issues in a systematic and evidence-based way. The Collaborative recognizes these issues to be a statewide public health problem and the stated goal of the Collaborative is "to make a measurable difference in excessive drinking and related harms among college students."

Through its association with the Collaborative, Towson University has partnered with the Baltimore County Health Department’s Underage Drinking Coalition on an initiative to encourage local liquor establishments to abide by a responsible retailers agreement. Universities and colleges located in communities with a high density of liquor establishments like Towson generally have higher levels of drinking among their student population. Many of these bars offer specials and low cost "day drinks" targeted at students and student organizations during special weekends such as Labor Day and Homecoming. The collaboration with Baltimore County allows the school to address this challenge head-on. Towson University has also pursued partnerships with local community groups including legislators, the city council, business owners and the chamber of commerce, providing these groups with training and financial support. Additionally, Towson University funds a grant for additional police officers in nearby neighborhoods as well as in local bars to support checks for fake IDs at the beginning of each semester.

Towson University has also implemented good neighbor policies. Towson University partnered with county officials and community members to implement a county-wide social host ordinance that not only fines student tenants, but also the landlords of houses with repeated noise and drinking violations. This particular intervention has been associated with a 50 percent drop in reporting of loud parties to law enforcement. The TU Community Outreach Coordinator provides education to students living off campus about being good and responsible neighbors. Student Community Ambassadors educate their peers about issues that will cause friction with their neighbors.

Also, as a result of the Collaborative, Towson University has implemented the Training for Intervention Procedures (TIPS) program, which helps campus leaders (e.g., student affairs, athletics, Greek organizations, club and intramural teams) develop intervention techniques to reduce high-risk drinking among their peers. The training helps identify at-risk or high-risk patterns of behaviors, and provides education on how to intervene. Ninety percent of students in the Greek system have been trained through this program, and initial
survey results indicate a significant impact. Also, the implementation of a care reporting system gives members of the community (e.g., staff, faculty, students) the ability to report on any student exhibiting signs of behavioral health issues.

Tom Sullivan, University of Vermont

UVM President Tom Sullivan is concerned about the role substance use plays in widening the gap between students’ potential and actual achievement. In 2014, Sullivan created the UVM President’s Committee on Alcohol, Cannabis, and Other Drugs, comprised of 70 stakeholders including faculty, staff, students, parents, community partners and law enforcement. The committee uses qualitative assessments to inform their initiatives and appropriate metrics were quickly identified to align with goals. Initiatives of the committee include: the establishment of a database that includes information about high-risk drinking and its impacts (e.g., passing out, skipping class, low GPA, study interruptions, having to watch over an incapacitated friend); the identification of higher-risk weekends and the implementation of additional programming on these occasions; regular communication with parents and students regarding substance use issues; mapping of off-campus high-risk areas and a corresponding increased Burlington police enforcement; universal screening for substance use at health services; surveying faculty to better understand their experience and concerns related to excessive drinking and substance use; the healthy masculinity initiative, designed to effect positive cultural change by improving gender relationships, supporting the positive engagement of men in the University community, and mitigating the impact of sexual assault; and the support of the Catamount Recovery Program, designed to provide students in recovery with a supportive community.

The Catamount Recovery program creates an on-campus community and social supports for students in recovery, providing them with a different way of connecting socially and emotionally in an environment that can often be viewed as "abstinence-hostile." College recovery programs are effective in reducing stigma for those who are in recovery, and those who are struggling with addiction. Research shows that students who join recovery communities experience better academic outcomes than the general college population.

A signature initiative is The Wellness Environment program. Started

For more information on the Wellness Environment program, see page 13
in direct response to the President’s Commission, the WE program incentivizes students to develop healthy patterns related to substance use, physical activity, nutrition, and community.

Beyond the initiatives formed in response to its recommendations, the Presidents’ Committee provides an opportunity to have a public conversation with senior leadership, faculty, staff, parents, alumni, and students. The Committee has achieved significant successes in a relatively short period of time. Between academic years 12-13 and 16-17, high-risk drinking numbers dropped by 24 percent, and the number of students needing to be detoxed for high levels of alcohol use dropped by 43 percent.
Key Takeaways

1. Presidential leadership is key

College and university presidents can strongly impact campus climates, reputations and practices, including how the institution addresses and is perceived to address student substance use. As the presidents who attended the college substance use event all agreed, leaders set the tone by what they say and do in a number of important areas.

Leadership involves pulling people together to form meaningful partnerships. From residential campuses in small towns to colleges in big cities, building partnerships within the campus and from the campus into the community bolsters the capacity of universities to fulfill their mission and strengthens their reputation as a leader in the state. Leadership involves taking innovative steps. How can I pull people together in ways perhaps they had never been put together before.” – Participating president.

Presidents can routinely send the right messages about campus policies and the fact that high-risk drinking is unacceptable and detrimental to student success. They can also demonstrate their commitment to addressing substance use on campus by making long-term investments in producing healthy, successful students. Presidential task forces that are well-staffed and committed to implementing evidence-based practices have been effective catalysts for addressing substance use challenges. But the presidents at our college substance use event also suggested that less formal, everyday actions can be very powerful as well.

When it comes to confronting the issue of college substance use, presidential leadership means getting involved directly – meeting with, relating to and understanding the perspectives of both students and faculty. Presidents have personal and professional experiences they can and should bring to bear on this topic, and getting involved directly communicates that it’s an important issue to which the president is committed. Leadership also means not avoiding controversy, not relying solely on numbers and not waiting for a public incident to take action. Presidents can safely assume that substance use is an issue for a significant number of students and should work proactively to address it as a campus-wide health and wellness priority.

“Leadership entails responsibility and accountability. One of the first pledges that we have as leaders is to be able to tell parents we can ensure the safety of their children. We all know the fact that when those 17-, 18- and 19 year-olds are coming to campus, that it is a stressful time for them, not only in those few weeks, but in the years ahead.” – Participating president.
2. Communication and integration of efforts is also key

One of the biggest barriers to supporting students and addressing substance use on campus is the continued fragmentation of the many groups that are involved in this arena – from internal partners in academia, health and public safety to outside stakeholders like neighboring communities and law enforcement. This is where campus task forces can be particularly effective, bringing all of the stakeholders to the table and, hopefully, engaging them in long-term communication.

3. Data is critical for understanding the problem

While universities should not rely solely on numbers, utilizing data is critical for understanding the magnitude of substance use problems, breaking down entrenched myths and misperceptions, identifying risk and protective factors, and shedding light on the associations between behavioral health issues and student success. Tracking data on substance use and associated problems allows college administrators to evaluate the success of interventions, track progress of outcomes and guide decisions about policy. Furthermore, evaluating interventions based on engagement and effectiveness can inform future prevention efforts.

Student surveys (e.g., climate surveys, the National College Health Assessment) and administrative records are valuable sources of data, and analyzing the content can provide significant insights on campus policies and substance use prevention strategies.

4. Faculty must be involved

Faculty members connect with students more regularly than anyone else at a university. They might be the first to notice something is wrong with a student. In such case, a simple conversation with the student might be the best next step, letting the student know that someone cares and can provide direction to appropriate resources if needed. But it is typically not that simple. Many faculty members are reluctant to get involved – for two reasons. First, if something is indeed wrong, faculty feel ill-equipped to deal with concerns because they are not behavioral health professionals. Second, faculty do not
want to be perceived as stepping out of bounds in expressing concern. These barriers are certainly understandable, and so it should be made clear to faculty that their role can be limited to simply reinforcing to students what kinds of resources are available. Consulting with other faculty ought to be encouraged as well. Often, multiple faculty members will notice similar dynamics about the same student. If several individuals express care and concern, the student may be more likely to pursue the appropriate help. For certain types of concerns, faculty can also utilize reporting systems established to identify students who are perceived to be a threat to themselves or others.

The reluctance of faculty to act and have these critical conversations with students might be ameliorated with training and professional development activities. While training is easier to provide to new hires, colleges should consider more widespread training for existing faculty. Such training could include general education on the prevalence of substance use and behavioral health issues among college students, how these issues interfere with learning and academic engagement, how to be sensitive to students who might be in recovery from addiction, how to best facilitate help-seeking through meaningful conversations, and a review of campus policies and available resources.

5. **Parents must be involved**

Parents of college students have invested a tremendous amount of time, energy and financial resources to get their child into college. They know that the safety and welfare of their student is partially dependent on a combination of personal responsibility and the policies and actions of the administration and other members of the campus community. They too have a significant role to play and can be constructively involved in their grown child’s life as he or she navigates the college years.

Most colleges find parent orientation an opportune time to disseminate information about expectations of student conduct, campus policies around alcohol and other drug use, and campus resources and support systems that are focused on student wellness and effective management of behavioral health issues. But communication with parents should be regular and extend far beyond orientation. Parents should be informed about resources available for assessing
potential mental health and substance use disorders. Ages 18-25 are the peak period for onset of these disorders. Parents should be vigilant about out-of-the-ordinary changes in mood or behavior during this important time in their child’s development. Early assessment is key so that problems can be managed as soon as possible.

Collectively, parents of college students are a highly diverse, multicultural group. Cultural norms can sometimes complicate the understanding of campus policies and actions. Furthermore, many parents have ingrained attitudes about college drinking as a "rite of passage," and many have approved of underage use and/or provided alcohol to their child prior to college. As well-intentioned as these practices may be, they are at odds with the evidence that clearly shows anything other than zero-tolerance attitudes toward underage drinking can increase the risk for excessive drinking during college.

"Often we hear parents saying things like 'Oh, it’s nothing that I didn’t do when I was in college.' Well, it’s far more than the keg party that parents remember with young people drinking two or three beers.” – Participating president

6. Community members must be involved

The surrounding community impacts student behavior quite significantly. Colleges benefit from communicating and partnering with local government and community leaders to support healthy student behavior. Restaurant and bar owners are especially important partners because they can encourage responsible serving behavior (e.g., cutting off visibly intoxicated individuals, not serving underage students, checking for false IDs). Businesses are interested in sustaining their livelihood but also have come to understand the importance of students’ safety and well-being. Regular meetings of "town-gown" coalitions – i.e., collaborative efforts between colleges and universities and the communities they inhabit – can help tackle the problem of high-risk drinking as well.

Additionally, social host ordinances – a collaboration with law enforcement – can help address the problems of loud and unruly parties in the neighborhoods surrounding a college campus. Under such ordinances, property owners and student tenants can be fined for repeated noise and drinking violations. These laws have been shown to reduce excessive drinking and related problems and reduce police calls for service.

Community partnerships of all kinds provide opportunities to educate community members and recruit their help in preventing substance use issues.
7. **Alumni must be involved**

Administrators might be hesitant to engage alumni on issues related to substance use because they believe, like parents, alumni have their own college experiences that can color their views. It is important for college leaders to educate alumni on the scope of the problem and the risks associated with it. Alumni education efforts should focus on the connection of substance use to outcomes like retention and post-graduation success. Alumni have a stake in the reputation of their alma maters; they are invested in the worth of their degree. Additionally, their children may be attending or planning to attend the school, fostering added interest in these issues. Administrators should challenge alumni to be connected to the school in a palpable, positive way.

8. **Greek life must be involved**

Students involved with Greek organizations are at higher risk for substance misuse than the general student population. College administrators have long struggled with how to engage with the leaders of the Greek system and individual Greek chapters. Most importantly, administrators must keep the lines of communication open with these groups. College leaders should have conversations about leadership and reinforce core values of personal responsibility that are included in Greek organizations’ creeds. Colleges should also implement best-practice strategies, including training to help Greek leaders identify high-risk patterns of behavior, perform party checks, etc. Alumni can have a dramatic impact on Greek life, and with appropriate training and education, they can be a positive force in the relationship with college administration.

9. **More training is needed**

Student affairs professionals are managing numerous challenges, and although they are the presidents’ go-to people for guidance and perspectives on behavioral health issues, they need support and training to keep up with the variety of issues that are affecting students. Effectively responding to health issues requires a keen awareness of best practices. Many of the college professionals who responded to
the survey on campus marijuana use were interested in additional training. It would be useful to provide colleges with guidance on how to select evidence-based practices, use student surveys and other administrative data to guide selected approaches, implement strategies and evaluate ongoing progress toward achieving goals.