

Date: June 5, 2019  
To: Council of Deans and Chancellor's Cabinet  
From: Task Force on Problematic Substance Use  
Subject: Final Report Summary

### **Task Force Charge**

The Task Force on Problematic Substance Use was charged with the following objectives:

- Heighten awareness/educate the campus about addictions facing IUPUI faculty, staff, and students.
- Inventory current IUPUI resources available in supporting faculty, staff, and students with addictions.
- Determine promising practices from other institutions and organizations, as well as what is known in the literature.
- Identify gaps between IUPUI practices and those suggested from external benchmarking and literature review analyses.
- Develop recommendations for IUPUI and IU to consider in addressing addictions on campus.

### **Overview of Task Force Work Plan Activities**

The Task Force on Problematic Substance Use convened its first large group meeting on October 10, 2018. The Task Force was given its charge and separated into four subcommittees or working groups: (1) Inventory of Resources, (2) Benchmarking, (3) Literature Review, and (4) Interviews. The Interviews Subcommittee was eventually eliminated because all key informants who could provide context and subject expertise to this topic, by way of personal interviews, were already represented on the Task Force. In addition to its first large group meeting in October 2018, the Task Force met on three separate occasions during spring 2019—January 30, April 22, and May 14.

Each subcommittee was responsible for identifying the best ways to work and collect data. Subcommittees either scheduled in person meetings and/or communicated via email. A Box folder account was also created so that all collected information and data could be shared with members of the Task Force.

The Task Force began drafting and editing individual subcommittee reports in April 2019. During large group meetings scheduled on April 22 and May 14, subcommittees provided details of their findings and list of recommendations. Task Force members were able to ask questions and provide feedback. A final report summary was drafted and edited by the Task Force co-chairs and to be shared with the Council of Deans during its meeting on June 6, 2019.

Afterwards, the Chancellor's Cabinet will review and discuss the final report summary during its retreat on June 11. The Cabinet will then decide next steps based on the list of Task Force recommendations.

### **Summary of Key Findings**

#### *Student Focused*

- IUPUI provides substance use related resources for students. Counseling and mental health services are available for all students, as well as the use of online self-screening tools. Educational and outreach initiatives focus on a number of topics including alcohol and other drugs, addiction recovery, and health and wellness coaching.
- Despite being a commuter campus and having one full-time person devoted to alcohol and other drugs (AOD) prevention and recovery efforts through the Office of Health and Wellness Promotion, IUPUI practices each of the elements of a comprehensive, evidence-based collegiate AOD prevention and recovery program.
- IUPUI's AOD prevention and recovery activities are well-documented, assessed, and measured in a number of surveys and reports by national AOD prevention bodies.
- IUPUI students are reporting less drug and alcohol use on average than national and Indiana trends might suggest. The most commonly used substance is alcohol and students believe that more students are using drugs and alcohol than they really are.

#### *Employee Focused*

- IUPUI provides substance use related resources for both faculty and staff. Employees are able to take advantage of various programs and workshops (e.g., counseling services through the Employee Assistance Program, personal resiliency training), health screenings, online wellness resources, and work-life balance classes and webinars.
- The lack of data specific to IUPUI employees is a significant barrier to addressing substance use concerns. It appears additional questions regarding substance use have been added to the current employee health survey. Direct anonymous assessment of substance use of employees and family members is needed.

### **Recommendations**

#### *Student Focused*

1. Given the increasing demand on mental health services among IUPUI students, IUPUI should consider providing comprehensive mental and behavioral services to students in a convenient one-stop-shop location on campus. Units best equipped to work together and

plan out the details of a one-stop-shop might include Health & Wellness Promotion, Student Health Center, Counseling and Psychological Services (CAPS), Department of Psychology, School of Social Work, and School of Nursing.

2. While IUPUI engaged in broad AOD (alcohol and other drugs) prevention and treatment options, it is not well publicized, communicated, nor marketed. It takes numerous website clicks for one to find AOD assistance on campus. This is also true at most similar-sized universities. Therefore, the Task Force recommends search engine optimization on the IUPUI website that takes students right to AOD prevention and treatment options on the Counseling and Psychological Services (CAPS) and Office of Health and Wellness Promotion (HWP) websites.
3. Other similar sized schools have a devoted wellness clinic or one-stop-shop. IUPUI should consider doing the same. A devoted wellness clinic would be an optimal place to locate AOD health and wellness promotion. As an example, IU Bloomington's AOD services are located in its comprehensive health center with numerous referral sources to treatment options in Monroe County.
4. The regular administration of student surveys (Indiana College Substance Use Survey/ICSUS, American College Health Association/ACHA) provides rich data regarding the trends in substance use among IUPUI students and comparisons with Indiana and national averages. Exploring ways to increase the distribution and response rates would make the data more meaningful by facilitating identification of target populations (graduate/professional students, residential students, etc.).
5. The research has supported many options for prevention and treatment of substance use on college campuses. The Task Force suggest IUPUI utilizes the *CollegeAIM* website (<https://www.collegedrinkingprevention.gov/collegeaim/>) to select the most appropriate prevention and treatment strategies for this campus. The National Institute on Alcohol Abuse and Alcoholism (NIAAA) developed the *CollegeAIM* guide and website to help college personnel choose wisely among the many potential interventions to address harmful and underage college student drinking. Specifically, we recommend low cost/high effectiveness strategies for prevention, such as alcohol skills training, normative re-education, and personalized feedback.

#### *Employee Focused*

1. IUPUI should provide more support for psychological health of faculty and staff, in addition to the personal resiliency training offered by Healthy IU. More support would include the improvement and a fluency of existing services.
2. IUPUI should look into the benefits of providing a monetary incentive to faculty and staff for mental health and addiction screening, in addition to the health screening currently being offered by Healthy IU.

3. The Healthy IU website should provide direct links to the following websites: National Institute on Drug Abuse (NIDA), National Institute on Alcohol Abuse and Alcoholism (NIAAA), National Institute of Mental Health (NIMH), and Substance Abuse and Mental Health Service Administration (SAMHSA).
4. Healthy IU should provide a webinar targeted to problem drinking or other substance use, in addition to the webinar on stress that is currently being offered.
5. There are few studies examining substance use among university employees. The lack of data specific to IUPUI employees is a significant barrier to addressing substance use concerns. While such use may be inferred from national trends, more precise data specific to IUPUI employees needs to be collected. If data is going to be collected in the future, it must be done in a way that maintains confidentiality and privacy.
6. Communication with employees is complicated by the limited extent to which participation in educational or training initiatives can be required. Therefore, an area for further exploration would be to determine the extent to which substance use issues and the availability of the Employee Assistance Program (EAP) are addressed during the onboarding process.

#### *Student and Employee Focused*

1. IUPUI should develop effective means to identify and publicize the many resources that are available to students, faculty and staff. The means to do so needs to be designed in such a way that it is able to be sustainable.
2. The Task Force recommends that campus health engage in screening and brief intervention of all faculty, staff, and students. There should also be increased availability of more intensive behavioral treatments (e.g., cognitive behavioral treatment and motivation enhancement therapy) for faculty and staff who require more services, potentially in the form of a multi-disciplinary clinic specifically for substance use and related comorbid disorders with expertise and support from CAPS, Student Health Services, Clinical Psychology, Social Work, Art Therapy, and Nursing.