Intersections of Mental Health Promotion & Substance Use Prevention Strategies

Hello!

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she/her

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University Health Services

Our campus:
The University of Wisconsin - Madison

Location:
Madison, WI

Type:
Public

Undergraduates:
35,665

- 44% in-state
- 9% international

Division:
Big 10
Research 1

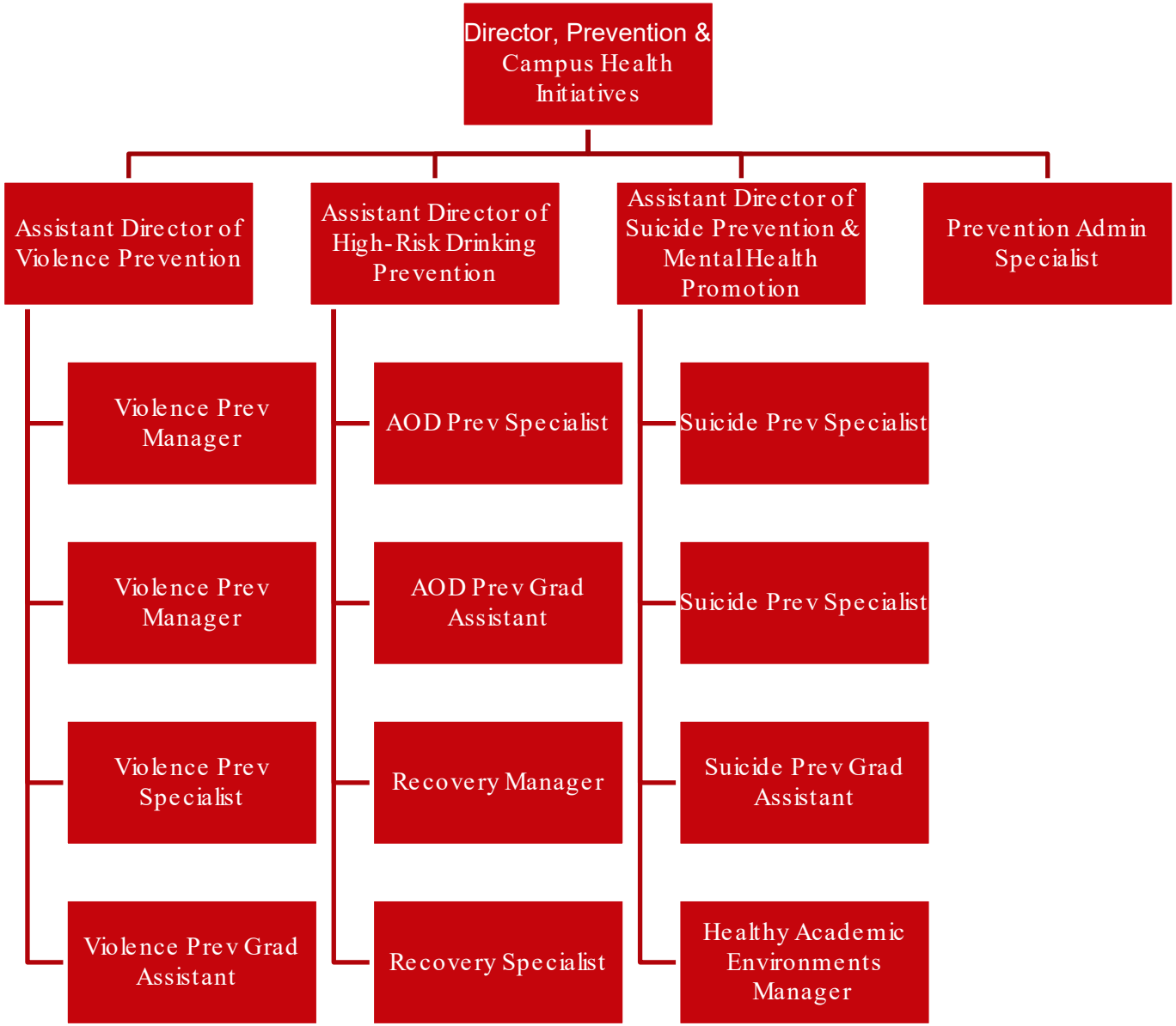
Prevention & Campus Health Initiatives as part of UHS

UHS | University Health Services
UNIVERSITY OF WISCONSIN–MADISON

Full-service student health center,
student fee-funded.

Areas of student support:
Medical – Mental Health – Prevention

Suicide Prevention
Violence Prevention
Alcohol and other Drug Prevention


Director, Prevention & Campus Health Initiatives
Assistant Director of Violence Prevention
Assistant Director of High-Risk Drinking Prevention
Assistant Director of Suicide Prevention & Mental Health Promotion
Prevention Admin Specialist
Violence Prev Manager
Violence Prev Manager
Violence Prev Specialist
Violence Prev Grad Assistant
AOD Prev Specialist
AOD Prev Grad Assistant
Recovery Manager
Recovery Specialist
Suicide Prev Specialist
Suicide Prev Specialist
Suicide Prev Grad Assistant
Healthy Academic Environments Manager

Agenda

- Opening and Framing
- The Intersections
- Common Prevention Approaches
- Strategy Alignment and Framework
- Action Planning
- Closing

Opening & Framing

Goals for today

1. **Build shared understanding of issue intersections** between mental health promotion and ATOD prevention.

2. **Identify integration opportunities** in order to build a proactive, evidence-based, and audience-relevant strategies at your institution.

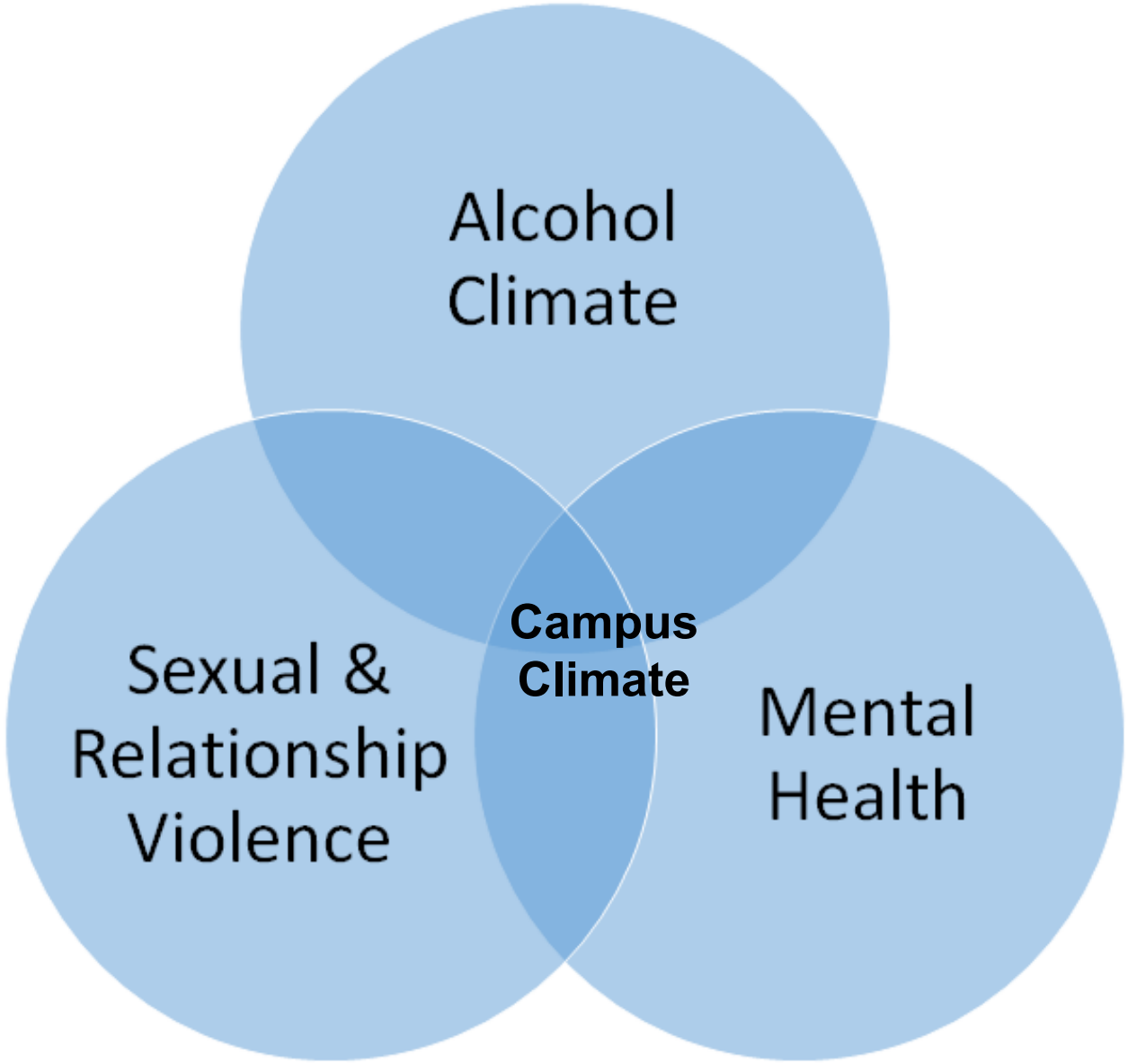
3. **Identify immediate steps you can take to** begin integrating strategies that may apply to your organization's overall prevention goals.

Why work at the intersections?

- Co-occurrence is common
- Fragmented approaches -> missed opportunities
- We can only go so far for either issue area alone

The Intersections

Intersections



Think - Pair - Share

1. Where do you see overlap between mental health promotion and substance use prevention work?
2. What do we know about the intersections of these topics?

Intersection: Shared risk and protective factors

Protective Factors

- Sense of Belonging
- Positive peer norms
- Social connectedness
- Coping skills
- Help-seeking
- Supportive faculty/staff

Risk Factors

- Depression and anxiety
- Social Isolation
- Trauma and adverse experiences
- Academic stress
- Sleep disruption
- Impulsivity
- Relationship difficulties

Intersection: Co-occurence

- High rates of substance use among those who die by suicide
- Increased suicide risk among individuals with substance use disorders
- Mental health conditions frequently co-occur with both

Intersection: Immediate Pathways

- Substance use lowers inhibition and increases impulsivity
- Intoxication increases risk of suicidal behavior
- Withdrawal worsens depressive symptoms
- Individuals may use substances to cope with stressors and difficult feelings

Intersection: Long -Term Pathways

- Substance use exacerbates mental health condition
- Relationship strain, legal/economic consequences

Intersection: Substance Use Disorder & Recovery

- College students in recovery face specific challenges
- Colleges can be recovery hostile environments
- Students in recovery do better when they have the support they need
- Students shouldn't have to choose between graduating or maintaining their recovery
- Fostering connection, belonging and community are essential for students in recovery

Prevention Approaches

Prevention Approaches in Common

- Universal, selective, indicated strategies
- Upstream
- Environmental strategies
- Early identification and intervention
- Reducing stigma, increasing help-seeking
- Building capacity of campus community to support students

Strategy Alignment & Framework

A Framework for Integrated Substance Use and Suicide Prevention

- Alcohol and other drug misuse and suicide risk exist on a continuum of student distress and wellbeing.
- Rather than focusing on each separately aim to focus on creating environments that reduce risk and increase connection, coping, help-seeking, and belonging.

Shared Systems and Strategies

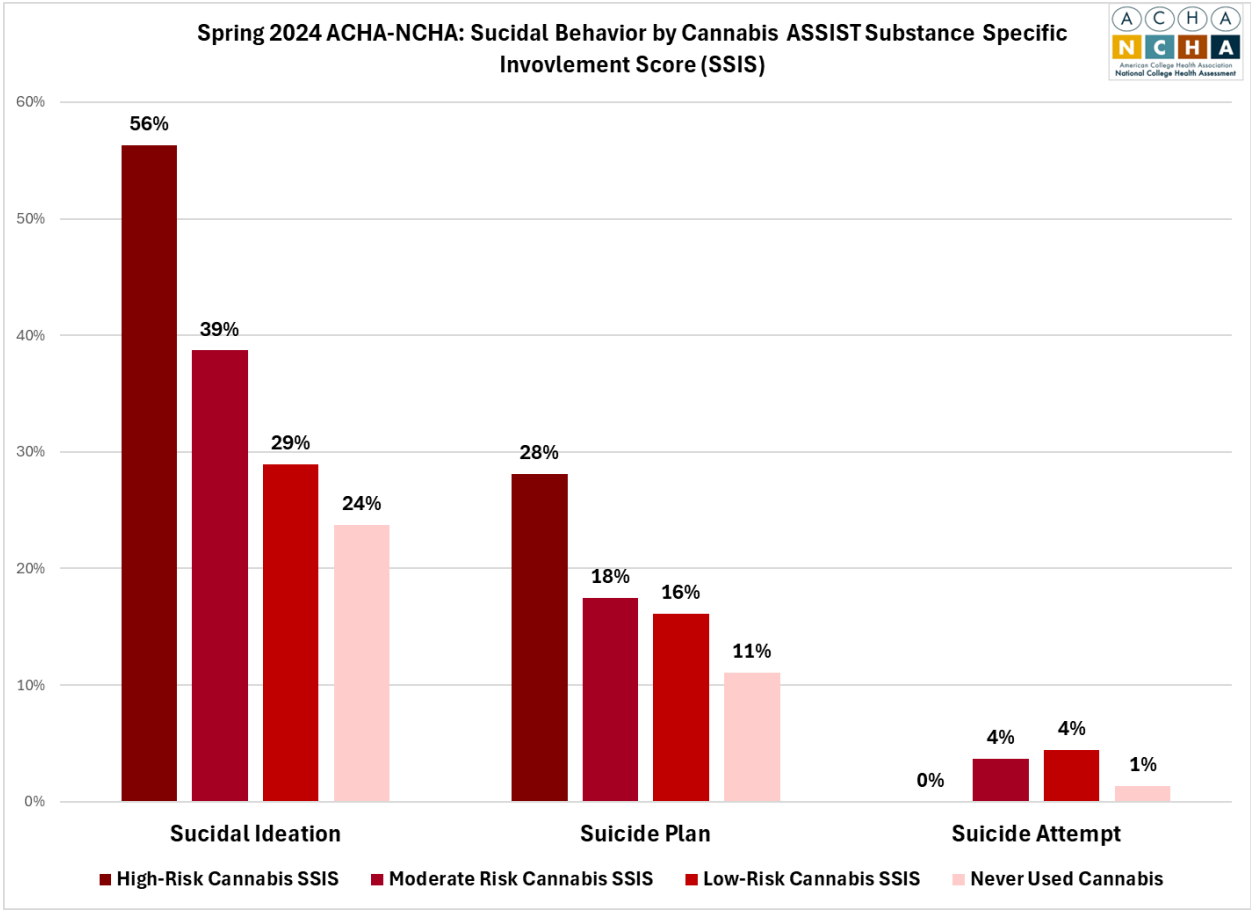
- Environmental
  - Limiting high-risk drinking environments
  - Promoting recovery friendly or alcohol-free spaces
  - Supporting belonging initiatives
- Early Identification
  - Training
  - Student of concern reporting systems
  - Behavioral Intervention Teams
  - Screenings
- Policy and Protocol
  - Amnesty Policy
  - Crisis response protocols
  - Case management systems
- Culture Change
  - Reduce stigma around help-seeking
  - Promoting wellbeing and community responsibility

Opportunities to Align Strategies

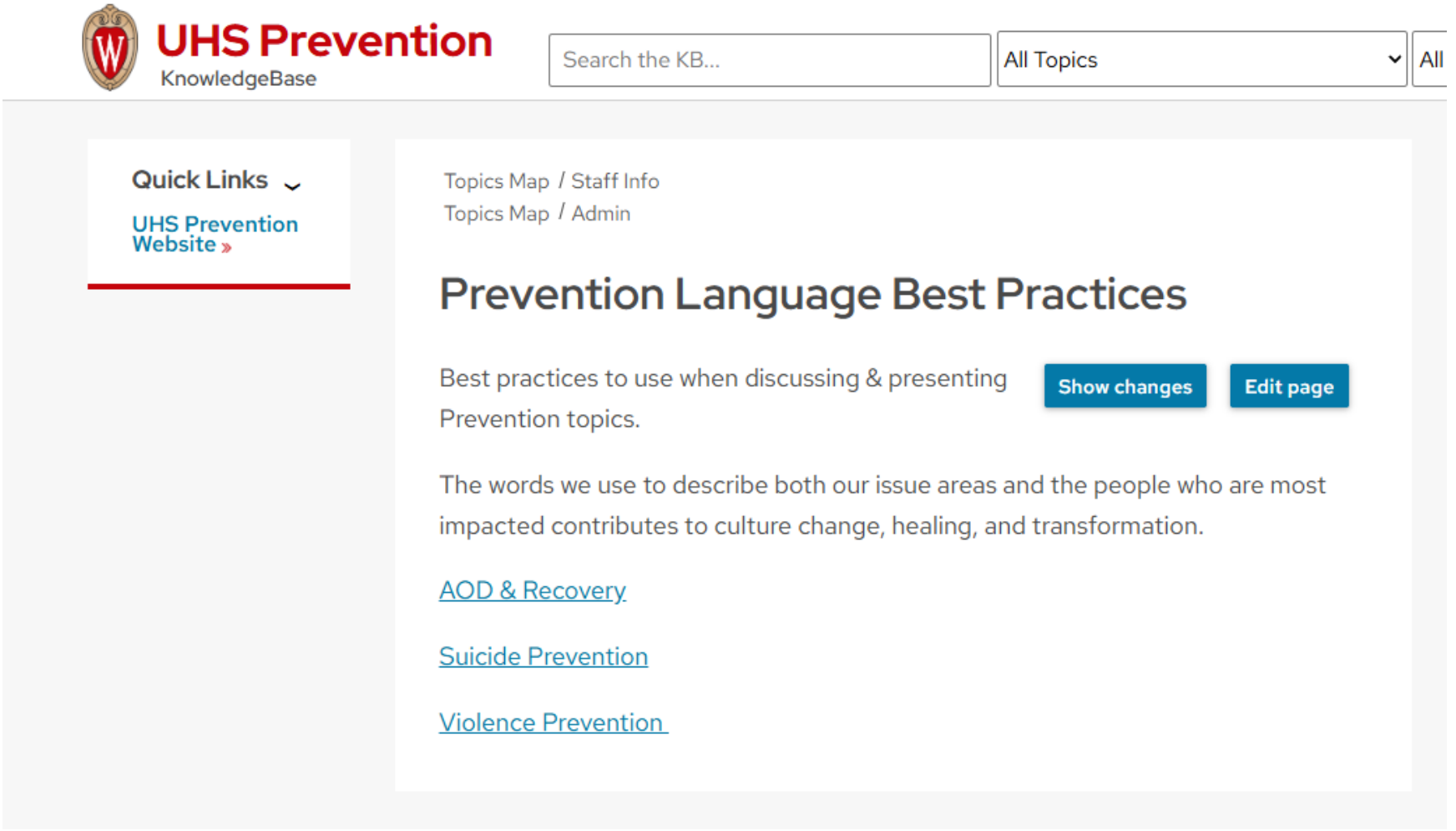
- Screening & Early Intervention (SBIRT, MI, suicide screening)
- Messaging & Communications (language guides)
- Cross training staff (onboarding tasks - review intersectionality documents, take other prevention trainings)
- Community-Based Strategies (third spaces, social connection)
- Crisis & Postvention Integration
- Means Safety & Environmental Safety (lockboxes, takeback)
- Policy Advocacy (student organization policy, amnesty)

Example: Screening & Early Intervention

- Cannabis & Alcohol SBIRT
- Pilot in Medical for anxiety and
- depression patients



Example: Sharing Language Guides



Example: Non - Drinker Event Planning Guide

Section	Examples
Planning	Include non-drinkers in the planning process. Have a plan to address intoxicated students.
Location	Do not host in a space that serves alcohol, has alcohol signage, or requires students to walk past a space where alcohol is being used.
Communications	Consider language: "alcohol-free"/"sober"/"non-drinker". Post signage to specify that the location is an alcohol-free space. Obtain consent if taking photographs.
Amenities	Provide a variety of substantial, alcohol-free food and drink options with special consideration for preparation methods (i.e., beer-battered cheese curds).
Evaluation	Ask students about drinker status to gauge non-drinker engagement for the event. Included a sample post-event feedback survey.
Infrastructure	Create an alcohol-free tag for campus events that are posted online. Uplift recovery-supportive campus policies.

Example: Medication Lockboxes

- No-cost for students
- All enrolled students
- Distribution at UHS front desks, no appointment
- Brief request form
- Brochure, informational card, website

uhs.wisc.edu/safe-medication-storage-and-disposal/

Overdose Harm Reduction on Campus

In Clinic

Indicated Prevention

Interventions:

- In-clinic HOPE kits
- Medication lockboxes

Communication:

- Posters and digital screens in waiting areas
- Provider talking points for conversations with patients

Campus-wide

Selected Prevention

Interventions:

- Provision of Narcan and fentanyl test strips
- Med takeback events

Communication:

- Alignment with high-risk times of year (e.g., Mifflin, Halloween, spring break)

Universal Prevention

Interventions:

- 35 campus Narcan boxes
- Free test strips in SAC
- Promotion of Med takeback sites on/near campus

Communication:

- Webpage, campus map
- Print education materials
- Posters and digital screens

Example: Developing Student Organization Policies

Policy XVII. Prohibition on Alcohol-Centered Activities

I. **General Rule**

Badger Supports as an organization shall not facilitate, participate, host, sponsor, or organize events primarily centered around alcohol consumption, alcohol sales, or alcohol-focused social activity.

II. **Application**

This policy applies to programs, events, sponsorships, partnerships, and organizational activities conducted in the name of Badger Supports.

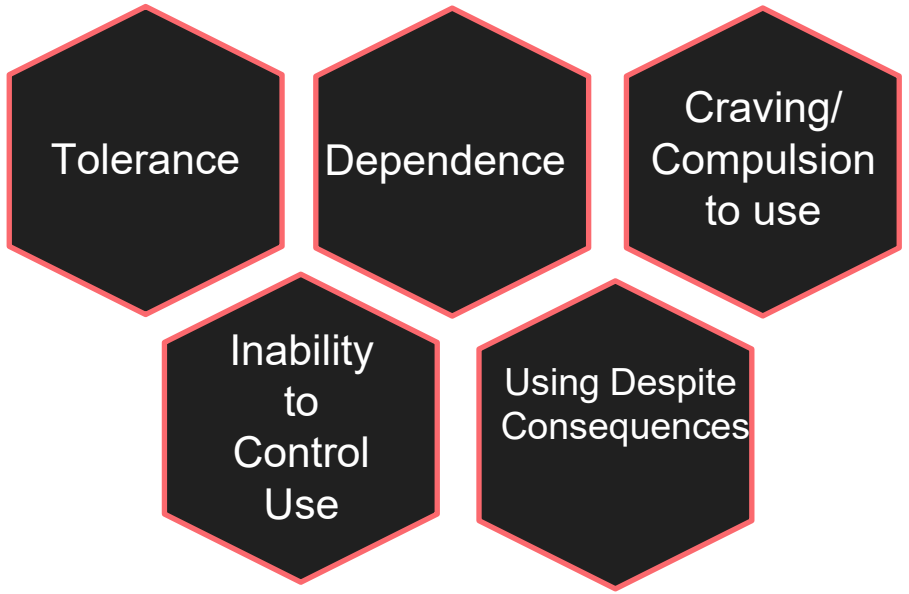
Example: All Recovery Services

Types of Addiction

- Physical
  - Substance Use Disorder (SUD)
- Behavioral/Process
  - Gambling
  - Sports Betting
  - Internet
  - Self-harm
  - Sex/Porn

*Eating Disorders (debated as an "addiction" but high co-occurrence with SUD and includes compulsive behaviors)

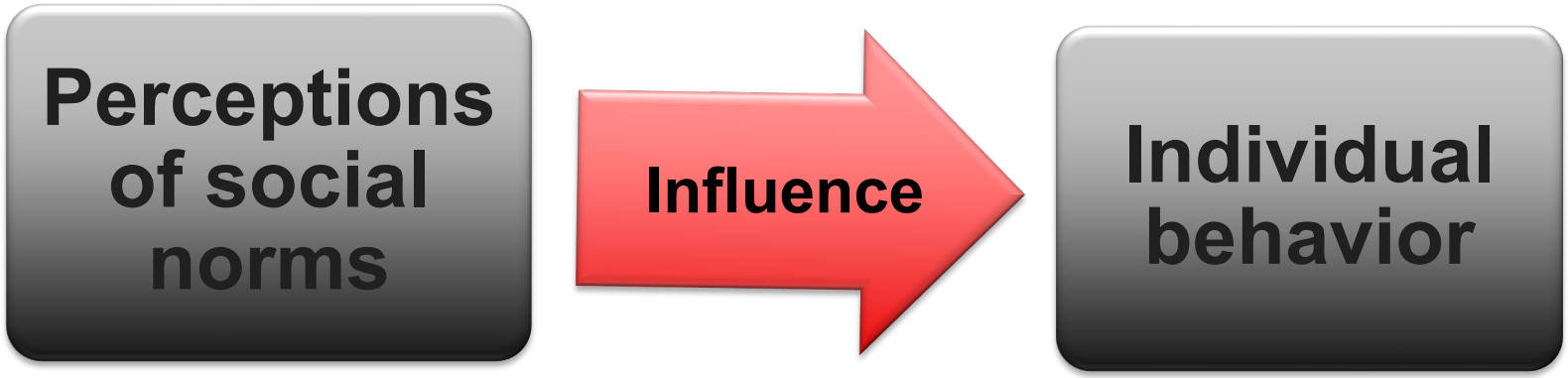
Prominent Features



Example: Social Norms to Reduce Stigma

All groups have social norms. Social norms are…

- Beliefs or actions
- Unspoken rules about what is normal for a group or situation
- Usually learned through observation; not formally taught



Misperceptions

Overestimate

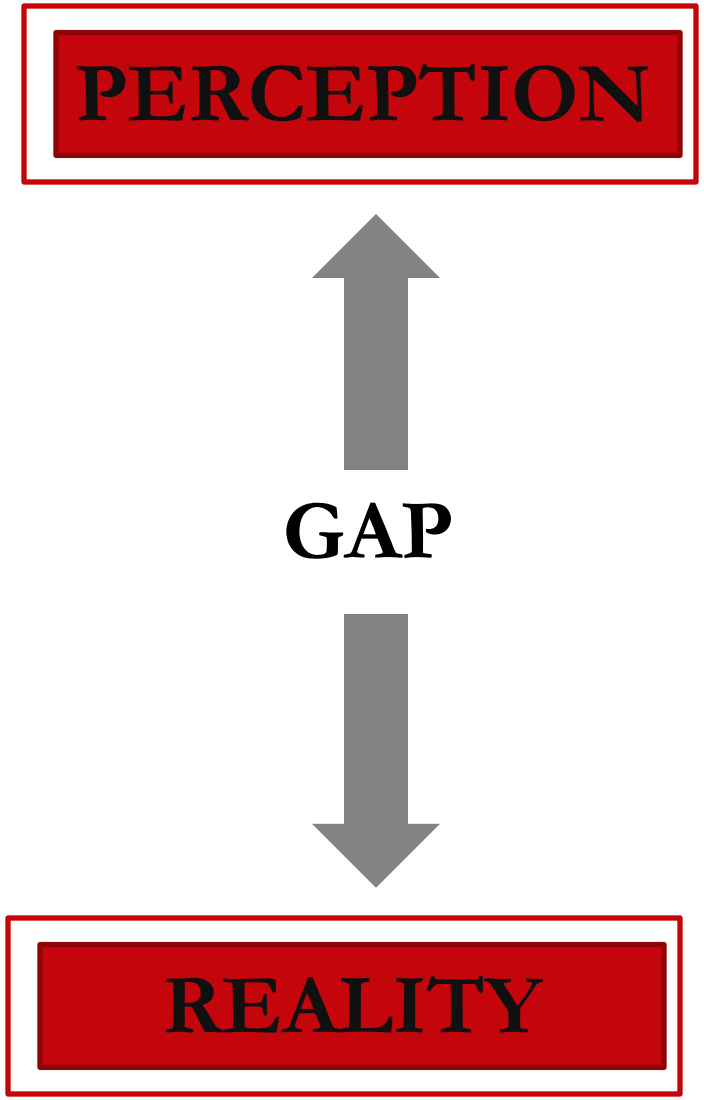
Unhealthy ***visible*** behaviors –

Smokers, high risk drinkers, violence, goofing off, credit card debt

Underestimate

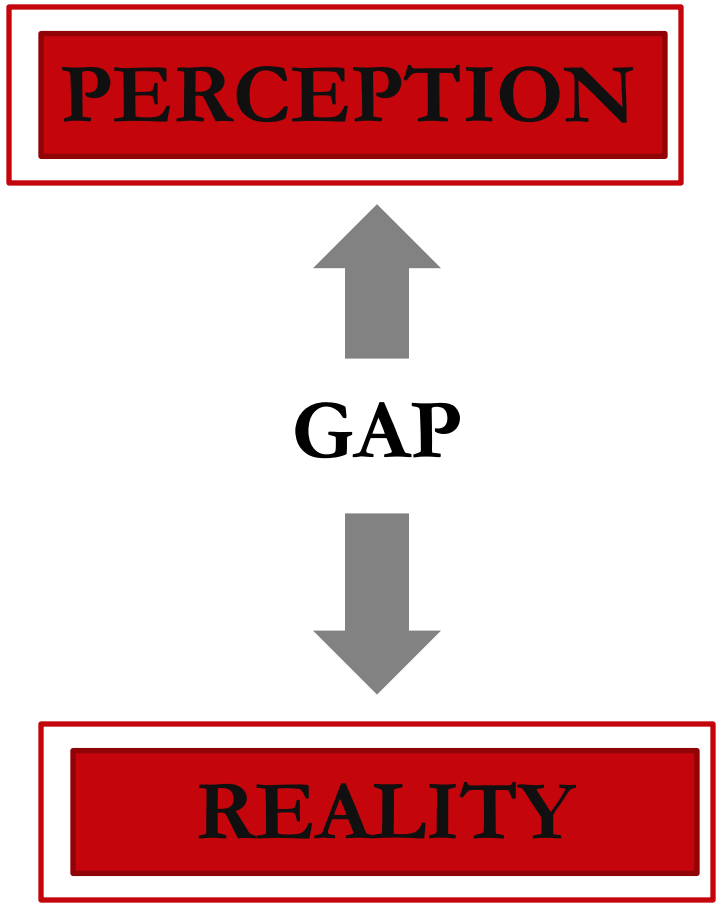
Healthy, **less visible** behaviors-

Non-smokers, moderate drinkers, academic seriousness

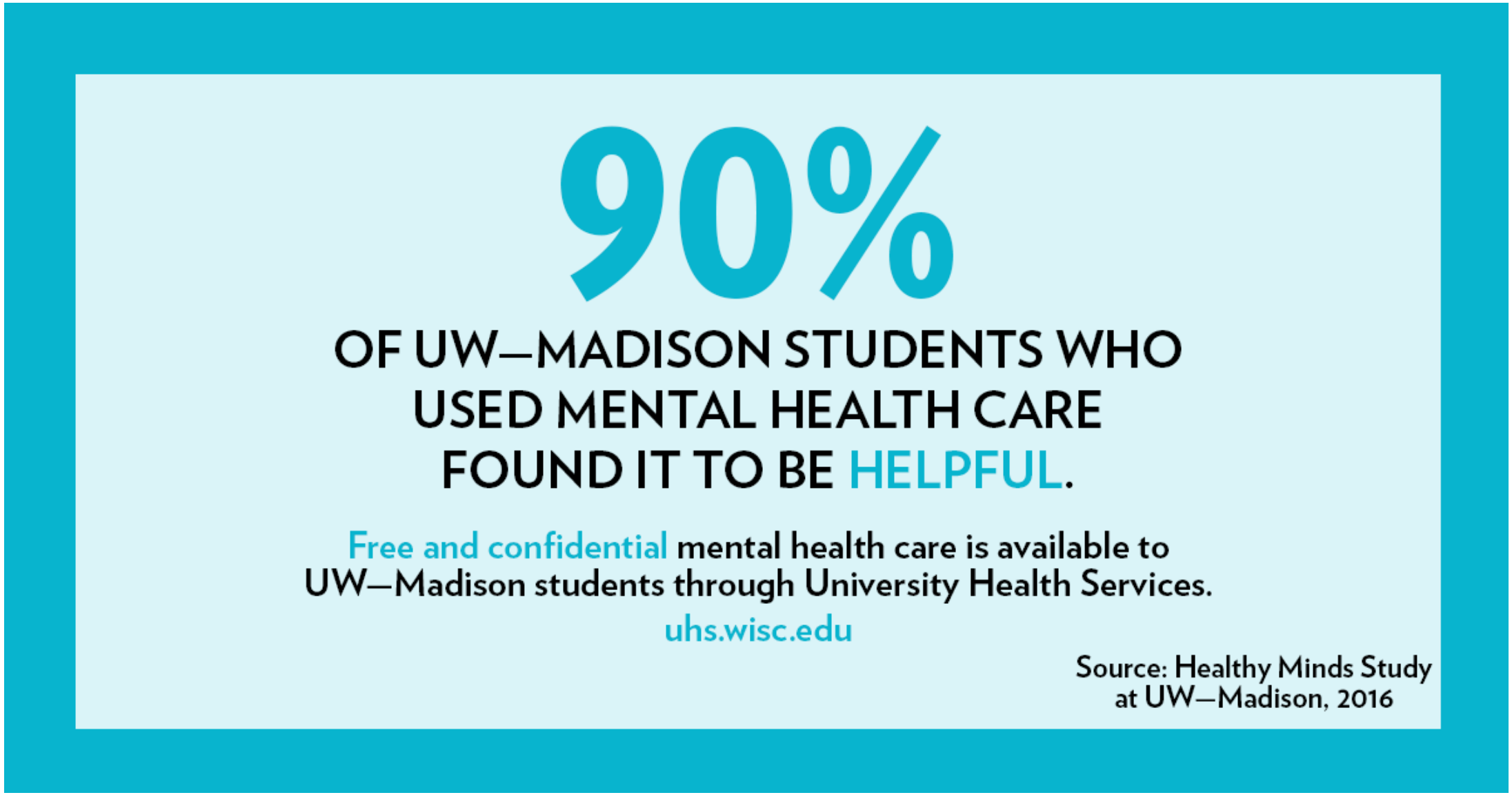


Social Norms Clarification UW-Madison example – mental health stigma

- PERCEPTION: 40% of our students believe other people would think less of those seeking mental health care.
- REALITY: 94% of students report that they personally do not endorse stigma.
- This message clarifies the reality at UW-Madison by correcting the incorrect perception.




94%
OF UW–MADISON STUDENTS
DO NOT THINK ANY LESS OF A PEER
WHO SEEKS MENTAL HEALTH CARE.
Asking for help is a sign of strength and maturity.
Free and confidential mental health care is available to
UW–Madison students through University Health Services.
uhs.wisc.edu
Source: Healthy Minds Study
at UW–Madison, 2016


90%
OF UW–MADISON STUDENTS WHO USED MENTAL HEALTH CARE FOUND IT TO BE HELPFUL.
Free and confidential mental health care is available to UW–Madison students through University Health Services.
uhs.wisc.edu
Source: Healthy Minds Study at UW–Madison, 2016

MOST
UW—MADISON STUDENTS
WOULD TALK TO
A FRIEND OR ROOMMATE FIRST
IF THEY EXPERIENCE EMOTIONAL DISTRESS.

Do you know how to support your friends?
Prepare yourself and complete a brief, online mental health program called At-Risk.
At-Risk teaches students how to recognize signs of distress in peers,
respond appropriately, and refer to resources.
uhs.wisc.edu/atrisk

Source: Healthy Minds Study
at UW—Madison, 2016

Action Planning

Reflection

1. What partnerships could we strengthen?
2. What is one integration opportunity you could start with?
3. Imagine you are going to meet with a colleague on your campus who works on mental health promotion or suicide prevention to talk about collaboration. What are 3 key points would you like to convey?

Longer -Term Strategies to Consider

- Shared funding proposals
- Data sharing
- Integrated strategic plans
- Coordinate across coalitions
- Joint advocacy agenda

Closing

Takeaways

- Intersections are leverage points
- Integration improves outcomes
- Prevention practitioners play a unique bridging role

Question/Discussion

Thank you!

Jenny Damask, EdD

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