



An Roinn Oideachais
agus Scileanna
Department of
Education and Skills

Framework for Response to the Use of Illicit Substances within Higher Education

Based on the Report of the Rapid
Response Group (RRG) on Use of Illicit
Substances within Higher Education

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Foreword by Minister Mitchell O'Connor

On the 25th of September 2019 I convened a Rapid Response Group, which included academics, Gardaí, students and first responders within institutions, who were tasked to devise an action plan to deal with drug and substance abuse within our higher education institutions.

All drugs are dangerous, each one exposing the user to physical, psychological and financial risks. Illicit drug use can have significant consequences for students, particularly if it begins early in their time in higher education. These include: negative impacts on academic outcomes, increase in dropout rates, delayed graduation, expulsion or suspension, failure to attain a degree, and potential impacts on career trajectories. Illicit drug use can also have a profound impact on mental health and has been linked to an increased risk of depressive symptoms, deliberate self-harm, suicidal ideation, and suicidal attempts.

Our institutions have a responsibility to promote and protect the health and wellbeing of our students. Just as HEIs are smoke-free zones, institutions and their residences should be drug-free zones. The harm experienced by some students through the use of illicit drugs is a threat to their success.

Students, their families, partners and social groups all play a role in an individual's attitude to drugs and the support available to them. While much is outside of the control of HEIs, both in terms of evolving societal norms and individual responsibilities, our HEIs nevertheless play an important role in the welfare of our students, setting the standards, responding to their needs and building a positive culture. Our third level institutions can assist in addressing the hazards of illicit drug use by implementing actions that have the potential to reduce the number of students who decide to use drugs in the first place, or to reduce the harm experienced by those students who have chosen to use drugs.

We are currently lacking comprehensive information on drug use among Irish higher education students, and this creates challenges in the development of impactful policies and harm reduction frameworks for our students. In 2019 I asked Dr Michael Byrne in UCC to undertake an extensive data gathering exercise for all higher education institutions. Statistics on drug use among students is largely anecdotal and I want a clear and accurate picture on the extent of the problem. This survey will be the first of its kind in Ireland, collecting comprehensive, sector-specific information on the numbers of using and non-using students.

While there are a range of examples of good practice throughout the HEI sector, the actions recommended by the Rapid Response Group seek to address the lack of a higher education sector-wide approach to the issue.

The actions I am tasking the institutions to undertake, following consideration of the Group's report, will ensure that all of our institutions have robust policies in place to tackle these issues.

The work I have done since taking up my role as Minister of State for Higher Education has been to ensure there is a broader focus on the wellbeing of students. The wellbeing of students is paramount to me. This student-centred focus will be embedded within the Healthy Ireland Healthy Campus initiative which will be rolled out in our higher education institutions by the Department of Health this year.

The actions I am recommending our institutions take are in line with our Government's National Drugs Strategy, '*Reducing Harm, Supporting Recovery*'. This strategy acknowledges the risks associated with drug use among young people, including the student population, and recognises the importance of high quality drug and alcohol education. It recommends that substance use education should be provided alongside wellbeing programmes, information campaigns and other preventative measures. Together these harm reduction, education and

prevention measures provide young people with the tools to make informed choices to safeguard and improve their health and wellbeing.

1. Introduction

On the 24th June 2019 a meeting was convened to seek the views from a range of academics, practitioners and experts in education, healthcare and law enforcement on the issue of drug use in Irish higher education. This initiative was prompted by some recent tragic deaths among third level students following drug use.

Following this meeting, a number of activities were initiated to further understand and develop responses to the issues discussed. Amongst these was the establishment of an interagency Rapid Response Group (RRG) with the goal of drafting a multi-component Action Plan, consistent with national strategy.

The RRG was chaired by Dr Andrew Power, Registrar of the Institute of Art Design and Technology (IADT), and the lead was Dr Michael Byrne, Head of Student Health Department, University College Cork (UCC). The group met on the 25th of September 2019 to begin its work and the group has since furnished its report on the outcome of their deliberations, which provides a series of recommendations for consideration.

Drawing on good practice examples, the experience of the team assembled, and the learning from existing research, the RRG has submitted a suite of recommendations under four key themes, informed by and consistent with the following:

- Existing legislation regarding the use and misuse of drugs.
- The National Drugs and Alcohol Strategy 2017-2025 – Reducing Harm and Supporting Recovery.
- The evolving National Healthy Campus Charter and Framework.

- The learnings from earlier work carried out at third level to tackle drug and alcohol related harm, including REACT (Reacting to Excessive Alcohol Consumption in Third-level).
- The input and expertise of the diverse members of the RRG.

The recommendations were complementary, and in addition to, existing actions and activities rolled out by other agencies, such as the HSE and the Department of Health.

This document is based on and reflects the work undertaken by the group and endorses their recommendations.

2. Summary Recommendations

Core Actions Recommended for Higher Education Institutions

In order to reduce the number of students who decide to use drugs and reduce the harm experienced by those students who have chosen to use drugs, HEIs are recommended to undertake the following four core actions

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|---|--|
| 1 | Each higher education institution should develop a Drug and Alcohol Policy specific to the HEI. |
| 2 | Each higher education institution should develop and implement a Drug and Alcohol Action Plan specific to the HEI and their students |

3	Each higher education institution should assign to a Senior Officer of the HEI the responsibility for leading the development of the Policy and the implementation of the Action Plan.
4	Each higher education institution should facilitate student engagement with the collection of national level data on drug use in HEIs.

An additional 12 recommendations under 4 themes are also proposed

Institutional Leadership	HEIs should complete a formal evaluation of the effectiveness of their own Drugs and Alcohol Action Plan at least once every three years.
	HEIs should provide drug, substance, alcohol and tobacco-free student accommodation and on-campus alcohol-free social spaces.
	HEIs should allocate space on the HEI campus for support groups working with those struggling with drug and alcohol abuse.
Student Engagement	HEIs should provide and actively promote to students an on-line educational, screening and brief intervention tool.
	Safety issues in the context of intoxicants such as drugs and alcohol should be considered while planning all large-scale student events.
	HEIs should develop and implement a Student Community Support system.
Community Engagement	HEIs should hold an annual meeting with local stakeholders.
	HEIs should develop partnerships with relevant local community groups.

Service Provision	Drugs and Alcohol counselling services should be available to students in the HEI.
	HEIs should develop a visible and accessible referral pathway for addiction assessment and treatment services for students.
	HEIs should provide interventions that target higher risk groups.
	HEIs should provide training for staff and students in how to deliver brief intervention and advice.

3. Societal Context

Illicit drug use among young adults remains a major public health threat in Europe, with one quarter (25%) of 18-21 year olds and 41% of 21-24 year olds reporting illicit drug use in their lifetime.¹ This population is particularly under-researched in Ireland,² as much of the research focuses on second-level

¹ European Monitoring Centre for Drugs and Drug Addiction. Annual Report 2012: The State of the Drug Problem in Europe. Publications Office of the European Union; 2012. 9291685380.

² Bennett TH, Holloway KR. Drug use among college and university students: findings from a national survey. J Subst Use. 2015; 20(1):50-55. WOS: 000346702800010 DOI: 10.3109/14659891.2013.878762.

populations,³ or is European and US based. Of the available Irish research, there are considerable variations in reported rates of drug use.

In 2002 and 2003, Irish third level institutions took part in the first national lifestyle study (CLAN) among undergraduate full-time students.⁴ It found that cannabis was the most common illegal drug used by students in Ireland with over a third (37%) reporting that they had used it in the past 12 months and one in five (20%) in the past 30 days.⁵ A higher number of male students reported using cannabis both in the last year (45%) and in the last 30 days (30%) in comparison with female students. The My World survey conducted in 2012 reported that young adults (the majority of which were third-level students) indicated high levels of substance use, with 45% reporting that they had used cannabis.⁶ This figure had increased to 53% in the recently published My World Survey 2⁷.

A limited student survey, completed by 2,701 students in 2014 in various HEIs around Ireland, reported that 82% of respondents sampled had used illegal drugs.⁸ Cannabis was the most popular drug with 55% of students reporting experimentation, while 26% reported having tried ecstasy and 9% of students had tried hallucinogens.⁹ The results of this student survey appeared to show a sharp increase in illicit drug use from that found in the previous decade. Sample size was relatively low and the planned national Drug Use in Higher Education in

³ Bennett TH, Holloway KR. Drug misuse among university students in the UK: implications for prevention. *Substance Use & Misuse*. 2014; 49(4):448-455. 24131261 DOI: 10.3109/10826084.2013.846378

⁴ Hope A, Dring C, Dring J. College Lifestyle and Attitudinal National Survey (CLAN). Health Promotion Unit, Department of Health & Children. 2005.

⁵ Ibid.

⁶ Dooley BA, Fitzgerald A. My world survey: National study of youth mental health in Ireland. Headstrong and UCD School of Psychology; 2012. 0957260806.

⁷ Dooley, B, O'Connor, C, Fitzgerald, A, & O'Reilly, A. My World Survey 2 The National Study of Youth Mental Health in Ireland. UCD School of Psychology and Jigsaw; 2019.

⁸ Bingham T, O'Driscoll C, De Barra G. National student drug survey 2015.

⁹ Ibid.

Ireland survey being run by the *My Understanding of Substance-use Experiences* (MiUSE) project team in University College Cork, led by Dr Michael Byrne, intends to give a more comprehensive picture.

The provision of higher education takes place within a societal context which is changing and evolving. The surveys referenced above provide a picture of the landscape in which students and educators are operating. It is important to acknowledge that much of this is outside of the control of HEIs, both in terms of evolving societal norms and individual responsibilities. Students, their families, partners and social groups all play a role in an individual's attitude to drugs and the support available to them. Nevertheless, our HEIs play an important role in the welfare of our students, setting standards, responding to their needs and building a positive culture.

4. Current Higher Education Landscape

Drug use is a societal issue and is therefore likely to occur in all HEIs. However, there is a paucity of reliable data as to the prevalence of drug use with little evidence as to reasons for non-use, the motivations for use, as well as the levels of harm experienced by students who do decide to take drugs. Where drug use is self-reported by the student, the range of supports available in most HEIs includes medical support, counselling support, students' union welfare officers, specialist referrals, advice from the HSE (including services in local and regional drug and alcohol task forces) and An Garda Síochana. The USI and many local students' unions engage in awareness activities around substance use and campaigns focusing on harm-reduction approach to the issue.

Whilst many HEIs have developed policies and implemented action plans in relation to alcohol use, there has been limited engagement by HEIs with the

issue of drug use. Initiatives that focus solely on abstinence and prohibition have fallen short in achieving, creating and sustaining, healthy campus environments.¹⁰ Although in their infancy, initiatives incorporating harm reduction measures have been more successful. The harm reduction approach recognises an enduring level of drug use in society is inevitable, thus defining its objective as reducing the adverse consequences of drug use experienced by the user and others.

The level of drug use and addiction reported as the reason for approaching counselling services and health units vary, with reported levels highest in larger HEIs and in larger urban areas. Data regarding the level of use of recreational drugs and addictive drugs is often anecdotal, indicating that drugs are readily available if the student 'asks around'. The availability of drugs on campus and in student accommodation settings is also difficult to quantify. Substance use by students often comes to light when it manifests as problematic socially, medically or in academic performance.

Some HEIs engage in awareness-raising activities on the issue of drug use and the broad focus of action is on preventing use and supporting students who choose not to take drugs. A number of the HSE Drugs and Alcohol Task Forces work closely with student bodies to provide information about drugs and accessing local services on campus.

Supporting positive choices for students is the predominant focus of HEI policies on drugs and alcohol. Up to now, HEIs may have been reluctant to engage with a harm reduction approach to the issue of drug use out of concern that this

¹⁰ Ralph J. Castro MS & Betsy D. Foy MHS, CHES (2002) Harm Reduction: A Promising Approach for College Health, *Journal of American College Health*, 51:2, 89-92, DOI: 10.1080/07448480209596335

approach might be seen as endorsing drug use or even that it might undermine the attempts to promote a do not use approach.

Adverse consequences of drug use

Illicit drug use can have significant consequences for students, particularly if it begins early in their time in higher education. These include: negative impacts on academic outcomes, increase in dropout rates, delayed graduation, expulsion or suspension, failure to attain a degree, and potential impacts on career trajectories. Students have reported missing classes and receiving lower grades as a result of their illicit drug use. There have also been tragic deaths among the third level student population.

5. National Drugs and Alcohol Strategy 2017-2025 – Reducing Harm and Supporting Recovery

The National Drugs and Alcohol Strategy was published in July 2017 and represents a framework for dealing with the issues of Drug and Alcohol use in Ireland. 'Reducing Harm, Supporting Recovery' is a whole of government approach that emphasises a health-led response to drug and alcohol use in Ireland.

This is the third national drug strategy since 2001, and it highlights the need to reduce the harms associated with substance use along with combating underlying reasons for the demand for drugs.

The vision for the strategy is for a 'Healthier and safer Ireland, where public health and safety is protected and the harms caused to individuals, families and communities by substance misuse are reduced and every person affected by substance misuse is empowered to improve their health and wellbeing and quality of life'.

To realise the vision, there are five strategic goals:

- Promote and protect health and wellbeing;
- Minimise the harms caused by the use and misuse of substances and promote rehabilitation and recovery;
- Address the harms of drug markets and reduce access to drugs for harmful use;
- Support participation of individuals, families and communities;
- Develop sound and comprehensive evidence-informed policies and actions.

The strategy identifies third level students as requiring interventions and mentions the need for harm reduction and brief advice tools which can signpost to locally based supports. The strategy also has an action to support evidence informed practice and service provision.

To this end, it recommends developing collaborative relationships with third level institutions in the area of drugs and alcohol so as to further Government-funded research priorities.

6. Recommendations for Action by Higher Education Institutions

While there are good practice examples in the higher education sector, and a number of higher education institutions have already instituted some policies on the use of illicit substances, the RRG identified a number of areas where HEIs could respond to the issue of drug and substance abuse within their institutions.

Arising from this, the RRG proposed a set of actions for higher education institutions to consider. From this set of actions, HEIs can then select which ones are most appropriate for their own institution. This report replicates and endorses those recommendations.

Not all of the action points listed below will apply to all institutions. For example, some refer to student accommodation, which is not a factor in some HEIs. It is also acknowledged that the scale of institutions and the resources available vary significantly amongst HEIs.

INSTITUTIONAL LEADERSHIP

HEIs should develop a Drug and Alcohol Policy specific to the HEI

This policy to be developed in collaboration with the local students' union, to be consistent with and informed by the National Drug and Alcohol Strategy and the Framework for the Development of a College Alcohol Policy.¹¹

HEIs should develop and implement a Drug and Alcohol Action Plan specific to the HEI

This action plan to be developed in collaboration with their local students' union and to contain a range of specific action points drawn from each of four key areas: Institutional Leadership; Student Engagement; Community Engagement; and Service Provision; including a focus on education; prevention and harm reduction.

The action plan should be tailored according to each local institution's needs, resources and local priorities, be consistent with current legislation, and guided by the National Drugs and Alcohol Strategy and local expertise.

¹¹ <https://reactalcohol.ie/wp-content/uploads/2019/02/collegealcoholpolicy.pdf>

<p>HEIs should complete a formal evaluation of the effectiveness of its own Drugs and Alcohol Action Plan at least once every three years</p>	<p>HEIs should devise and complete an evaluation strategy to monitor the effectiveness of the Drugs and Alcohol Action Plan at least once every three years. Interim reviews can be undertaken at earlier intervals.</p>
<p>HEIs should provide drug, substance, alcohol and tobacco-free housing and alcohol-free social spaces</p>	<p>This could include developing a contract of occupancy for student tenants in institution-owned student accommodation.</p>
<p>HEIs should allocate space on the HEI campus for support groups working with those struggling with drug and alcohol abuse</p>	<p>This might include peer-led abstinence based recovery services such as HSE SMART Recovery or Alcoholics Anonymous or Narcotics Anonymous.</p>

STUDENT ENGAGEMENT	
HEIs should participate in and facilitate the collection of national level data on drug use in HEIs	The institution should facilitate the MiUSE survey team in collecting data using a standardised survey instrument that will provide individual and HEI anonymised data at a sector level to reveal motivations and prevalence of use and non-use of drugs, adverse consequences experienced, motivations, readiness and capacity to change.
HEIs should provide and actively promote to students an on-line educational, screening and brief intervention tool	<p>The tool should:</p> <ul style="list-style-type: none"> • provide evidence-based educational material and actively support mindful choices not to take drugs. • assist individuals to identify consequences for themselves and others of their drug-taking. • provide personalised feedback to the students and assist individuals to develop personalised plans to reduce harm and change their drug-taking behaviour. • include signposting to institution and local addiction, mental health and other support services.

<p>Safety issues in the context of intoxicants such as drugs and alcohol should be considered while planning all large-scale student events</p>	<p>An item relating to drugs and alcohol and any related safety issues such as idiosyncratic reactions or overheating should be discussed and appear on the agenda of all SU, student society and student club events, with event management plans naming intoxication as a hazard that needs to be considered at such events.</p> <p>Organisers should actively seek opportunities to promote non-alcohol/substance events as well as promoting harm reduction initiatives and have guidelines for what to do in the event of an emergency and utilise HSE campaign resources aimed at events.</p>
<p>HEIs should develop and implement a Student Community Support system</p>	<p>Develop and implement a Student Community Support system for key “student weeks” (e.g. R&G Week, Freshers Week, etc.) to support students during weeks of peak social activity. Students’ unions should be encouraged to share their messages through their social media channels and on campus in advance of student-led events or festivals.</p>

COMMUNITY ENGAGEMENT	
HEIs should hold an annual meeting with local stakeholders	Hold a minimum of one meeting annually with local stakeholders (e.g. local Gardaí, residents, local businesses, etc.) as a forum to discuss concerns and to consider suggestions and respond to these concerns.
HEIs should develop partnerships with relevant local community groups	Partnerships developed with relevant local community groups (e.g. local council, healthy cities committee, etc. local and regional drugs and alcohol task forces).

SERVICE PROVISION	
HEIs should assign a senior officer of the HEI responsibility for leading the development of the Policy and implementing the Action Plan	A senior officer of each HEI should be identified as responsible for leading and implementing the policy and plan to ensure that high-level commitment of the institution is secured. The officer to have the authority, credibility and expertise to help lead and facilitate change in this challenging area.
Drugs and Alcohol counselling services should be available to students in the HEI	Additional resources should be made available to student counselling and student health services in order to provide an accessible addiction counselling and health service to the student body, to target drug-related harms. The HSE services to collaborate where appropriate with state and voluntary sector services that may be available in the community.
HEIs should develop a visible and accessible referral pathway for addiction assessment and treatment services for students	Develop a visible and accessible referral pathway to a range of internal and external addiction support services for students.
HEIs should provide interventions that target higher risk groups	The HEI should develop interventions that are specifically targeted at higher risk groups. This is important given the evidence that riskier drug-taking

	<p>practices can occur in vulnerable individuals or individuals from minority groups or communities</p>
<p>HEIs should provide training for staff and students in how to deliver brief intervention and advice</p>	<p>Key individuals in the institution should be able to deliver brief intervention and advice around drugs and alcohol misuse and have a clear understanding of the internal and external referral pathways to other services.</p> <p>These key individuals should be identified by each institution but may include staff mentors, peers, and welfare services, as well as the medical and counselling services.</p>

7. Data Gathering

Work to implement these recommendations has already commenced, as the MiUSE group in UCC, led by Dr. Michael Byrne, has been funded to conduct robust research to gather up to date and sector-specific data on the issue of Drug Use in Higher Education in Ireland, as recommended in Core Action number 4.

It is critical that there is accurate data to help inform future actions and strategy in this area, and a total of 22 of our HEIs have agreed to participate in the Drug Use in Higher Education in Ireland (DUHEII) study. This will be a sector-specific in-depth look at drug use and indeed non-use, amongst our students, looking in particular at their motivations to use and not to use drugs, the adverse consequences suffered, their willingness and capacity to change their drug use or to remain abstinent as well as the impact drugs have on their academic experiences.

The robust methodology employed by the research team will ensure that we get as representative a response as possible with a very large sample size generating the most comprehensive data-set on this issue to date.

The survey has the strong backing of the Union of Students in Ireland and the project team is comprised of experts from UCC in the areas of Student Health and Wellbeing, Public Health, Applied Psychology, and Business information Systems, with external guidance and input from Dr Eamonn Keenan, National

Clinical Lead-Addiction Services, Consultant Psychiatrist Professor Mary Cannon RCSI and Dr Jo-Hanna Ivers, Assistant Professor in Addiction Trinity College Dublin.

This study has the potential to provide a longitudinal look at this critically important societal issue of drug use in our 3rd level education sector and the excellent levels of commitment to the survey by the third level institutions shows their willingness to implement the Core Actions and the other Actions recommended in this report.

Appendix 1 - RRG members

Dr Andrew Power (Chair)	The Institute of Art Design and Technology (IADT)
Dr Michael Byrne (Lead)	UCC Head of Student Health Service
Dr Eamon Keenan	National Clinical Lead-Addiction Services, HSE
Nicki Killeen	Development Worker, National Social Inclusion Office, HSE
Paul Moriarty	Director of Student Experience UCC/Chair Student Affairs Ireland
Mai Fanning	President of the National Parents Council Post Primary
John Hannon	Director of Student Services, NUI Galway
Jimmy McGovern	NUI Galway
Fr Ben Hughes	NUI Galway (Chaplaincy)
Roisin O' Connell	The Technological Higher Education Association (THEA)
Lia O'Sullivan	Head of Communications, Irish Universities Association (IUA)
Róisín O'Donovan	USI Vice President Welfare Officer
Assistant Commissioner John O'Driscoll	Special Crime Operations
Assistant Commissioner Orla McPartlin	Community Engagement and Public Safety
Superintendent Kevin Daly	
Dr Jo-Hanna Ivers	Assistant Professor in Addiction TCD
Professor Mary Cannon	Psychiatrist, Royal College of Surgeons in Ireland (RCSI) - Youth Mental Health Taskforce

Terry Twomey	LIT VP Academic Affairs & Registrar
Meabh McGuinness	Education Project Manager, HSE
Gertie Raftery	Chairperson PCHEI
Laura Devlin	Administrator

Appendix 2 – Institutions Participating in Data Gathering

The following is a list of the institutions that participated in the Data Gathering exercise outlined above.

Cork Institute of Technology
Dublin City University
Dun Laoghaire Institute of Art, Design and Technology
Dundalk Institute of Technology
Galway-Mayo Institute of Technology
Institute of Technology, Carlow
Institute of Technology, Sligo
Institute of Technology, Tralee
Letterkenny Institute of Technology
Limerick Institute of Technology
Maynooth University
National College of Art and Design
National College of Ireland, Galway
Royal College of Surgeons, Ireland
St. Angela's College,
Technological University Dublin
Trinity College Dublin
University College Cork
University College Dublin
University of Limerick
Waterford Institute of Technology
Mary Immaculate College

