

Addressing Campus Substance Use Problems: Does One Size Fit All?

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I am frequently struck by what I perceive to be a consistent if not stubborn problem as I speak to and correspond with student affairs colleagues about the persistent problem of high-risk or dangerous collegiate drinking. As I express my views and argue my positions on prevention, intervention and treatment of substance using students, I frequently get respectful but nonetheless concerned questions about approaches steeped in “environmental management,” “harm reduction,” “Motivational Interviewing” and “stages of change” theory as though they exist somewhere beyond the known solar system of acceptable student affairs strategies. Comments—if not respectful objections—lament “having to choose” between various models as if fearing that I am somehow advocating the abandonment of traditional views in reckless pursuit of my own professorial perspectives on delivering effective and comprehensive student AOD services.

When introducing the topic of “new” or “different” approaches in the delivery of AOD services to students, there appears to be something of a generalized sense of concern that “The Way,” as it is understood, is about to be “trashed.” This misperception seems to set off a series of events culminating in emotional reactions that cause the discussion to generate more heat than light. Put another way, it would seem that student affairs professionals have traditionally approached the issue of new prevention and intervention strategies as somehow necessitating a dichotomous choice between the proposed new models of programming and the established, traditional way. It is as if there is a *one-size-fits-all*, “K-Mart approach to delivering effective AOD services to students. I sometimes wonder if student affairs professionals tend to operate from the belief that there is one correct way, “THE way” if you will, to address substance use problems in higher education with all else being either “wrong” or at best, “ineffective.”

While I do not argue that there are “best practices”—I too have my own opinion on what works best and is effective in addressing high-risk and dangerous student behavior—the purpose of this essay is not to further any one “model.” Rather, I ask, what if the student affairs was to embrace the fact that there may be more than “one truth”? Does everyone with coronary artery disease have by-pass surgery? Are all individuals diagnosed with depression treated with medication? Is surgery the only approach to treating cancer with all other approaches somehow “wrong” or at best ineffective?

It would seem to me that our field is in need of addressing some rather provocative questions: What is the purpose of addressing student drinking and substance use behaviors? Is it to simply address the problem or do we intend to affect the choices and behaviors of the individual students affected by the problem? Students mandated to

prevention and intervention efforts by the campus judicial system are likely to respond to programming differently than are those who present voluntarily. Yet if health educators, counselors, and other student affairs professionals somehow feel obliged to decide "which prevention or intervention approach is right and which is wrong," then we are basically forcing them to address the campus problem rather than the individual student experiencing the problem—"attention shoppers: Blue-light special on changing high-risk student behavior in aisle 4; one-size-fits-all."

As my grandfather used to tell me, "Robert, sometimes you have to give folks what they want to get the chance to give them what they need." Sometimes we need to help clients address the items on their agendas in order to encourage them to trust us enough to consider the items on ours. As James Prochaska and others argue in defense of their view that individuals progress toward behavior change along a continuum, change happens in stages. If this is true, we, as student affairs professionals, have an obligation to meet our students where they are on this continuum of readiness to change. Rather than insist that students meet us where we are in a "one-size-fits-all" approach to addressing high-risk behaviors, perhaps we need to consider that student resistance may say more about the effectiveness and appropriateness of our efforts than it does about the students who are resisting.

A case in point: As environmental strategies employed by campuses intent on changing the campus drinking culture begin to yield results, a phenomenon is beginning to emerge across the country. As comprehensive policies are implemented, enforcement is consistently pursued, and the availability of alcohol is curtailed on campus, students are choosing to party away from this controlled environment, often in high-risk environments such as run down apartments or unsafe/un-regulated (by licensing authorities) locations. As it becomes more difficult to party on campus due to efforts to curb high-risk, dangerous student drinking, some students--and admittedly this is a minority--have opted to take their former approach to collegiate socializing away from the areas regulated or directly influenced by campus rules and regulations. As a disciple of harm reduction, I am troubled by this phenomenon as it suggests that the evidence of our success on campus may result in placing students at greater risk as they change the venue of their socializing rather than their behavior.

I do not for a moment doubt the utility of environmental strategies, nor do I advocate curbing this effective approach to "changing the campus drinking culture," but at the same time, we need to ask, "do we have an obligation to address the resulting social changes that are occurring in that campus drinking culture?" And if so, how might we go about doing so?

It seems to me that the focus on the environmental model of change has been pursued to the exclusion of the ecological model. While this may at first seem like the opening salvo in a lesson on semantics, these are two distinctly different approaches to changing collegiate drinking. Yet like mentioned above, the quest for the "silver bullet" that will slay the werewolf of high-risk collegiate drinking too often drives us to pursue "the" way

to address the problem rather than realize it will likely be a coalition of approaches that eventually resolves the dilemma.

Where the environmental model targets those factors that are constants on campuses and can affect student behavior, e.g., public policy, enforcement, alcohol-free alternatives, etc., the ecological model focuses on the dynamic population that attends these campuses. Environmental strategies are focused on the constants that remain fixed from year to year whereas the student population is always in flux. To invest in changing the environment to which students come to pursue a higher education without considering similar strategies designed to address the needs of the students making the migration is something akin to establishing safe compounds in a foreign country for our visitors without addressing their need to become aware of local customs, language, or values.

In the ecological model, "(a) young people come to campus with social, family, and drinking histories that influence their college drinking behaviors; and (b) once on campus, peers, residence, and lifestyle factors further influence what they believe, endorse, and do with regard to alcohol" – from <http://www.hsph.harvard.edu/amod/behavemod.html>.

It is important that we recognize that, "...drinking-related norms and behaviors result from interactions over time and space between many individual and environmental factors located at each level of the social continuum (individual, peer, school, community, and culture). Because **environmental factors** remain constant in the college environment, where the student population changes annually, the simultaneous implementation of both high risk programs that target individual determinants of drinking and population programs that target environmental determinants of drinking have greater potential to produce lasting changes" - from <http://www.hsph.harvard.edu/amod/modelhow.html>.

There is an old African proverb that suggests, "The way you eat an elephant is one bite at a time." Perhaps we should recognize that change happens "one student at a time," and the approaches we employ should be tailored to the needs of those individual students rather than the problems we see so many experiencing. Why must we as student affairs professionals be forced to choose between models of prevention and intervention rather than to approach them as all being "tools in the same student affairs toolbox," available for use as the job requires. Something else my grandfather taught me all those years ago was that, "True craftsmen don't open paint cans with a screw driver." Perhaps we should choose the best tool for the job to ensure the best results when we have finished.

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