

# DRUG & ALCOHOL IMPACT PILOT

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IMPACT REPORT

2020 - 2022



STUDENTS  
ORGANISING FOR  
SUSTAINABILITY  
UNITED KINGDOM

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- UWE Bristol and The Students' Union at UWE
- University of Leeds and Leeds University Union
- Keele University and Keele University Students' Union
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## CONTEXT

Historically UK university campuses have taken a zero-tolerance approach to student drug use. Whilst potentially aiming to reduce the prevalence, the [Taking the Hit](#) survey found that 65% of students were unaware or did not know about their university's drug policy, suggesting that this was an ineffective deterrent. As with other challenging areas, such as sexual or gender-based violence, not talking about drug use has not made it go away.

These policies are not only ineffective but, as described in the [HEPI debate paper](#), are now causing further harm to students. For instance, addressing drug use in a purely punitive manner has resulted in support pathways that are unclear and underutilised. In the [Taking the Hit](#) survey, 40% of students said they would not feel confident in disclosing information about their drug use to their college without fear of punishment. With an increasing [decline in student mental health](#) and well-evidenced links between mental health and substance use, zero-tolerance policies are closing down discussions and education that would provide students experiencing mental health problems with another possible access point for support.

Furthermore, zero-tolerance approaches are preventing the right policies and practices being put into place to reduce the number of student drug-related deaths every year. The [DUHEI survey](#) of over 11,500 students in Ireland found that under a third (29.5%) of students surveyed were fully informed about the risks of using drugs. With university often being a period of challenging transition, students do not fully have the knowledge and tools to make informed decisions about their health, whether it be trying a drug for the first time or drinking alcohol whilst taking prescribed medication.

Lastly, these zero-tolerance policies steeped in disciplinary action may be unfairly affecting students of colour and other minority groups. In 2021, according to [Stopwatch](#), black people were nine times more likely to be stopped and searched for drugs, despite using drugs at a lower rate than white people. The same report found black people are treated more harshly when they are found in possession of drugs. Furthermore, the Taking the Hit survey found that women, LGBT+ and disabled students were significantly more likely to cite motivations for taking drugs linked to their mental health.

## 1.0 EXECUTIVE SUMMARY

Drug and Alcohol Impact (DAI) is an accreditation programme developed and managed by SOS-UK. DAI launched as a pilot in November 2020 following a six-month sector-wide consultation. It is a framework and support programme for students' union and university partnerships to embed responsible drinking norms on campus and move toward reducing harm related to student drug use, thereby building healthier and safer student communities.

Through the two-year pilot (2020-2022), partnerships focused on reducing harm from drug and alcohol use. Actions taken by partnerships included; increasing knowledge of student drug use, developing harm reduction policies, improving provision of support for students, providing harm reduction advice, setting up training for relevant staff and student roles, and redeveloping disciplinary procedures to increase support for students.

**“If we weren’t involved in this framework, I don’t think there would have been a chance for us to lead [our drugs and alcohol work] in a certain way.” - Feedback from a pilot partnership**

**“[Drugs and Alcohol Impact has] given us the opportunity to look at things in a different light, looking at it in a different way of approaching things and being able to put it into action, has been fantastic.” - Feedback from a pilot partnership**

**“The support that SOS-UK has given us has only ever been positive in terms of being able to talk to them about any frustrations that we got, and exploring options around that, but also being able to just check in with them at times around where things are, and they’ll be able to give us some quite honest feedback.” - Feedback from a pilot partnership**

As the first programme of its kind, DAI has identified recommendations for other universities and students' unions considering their approach:

- Develop a strong partnership between the students' union and university;
- Engage a range of stakeholders, with senior management representation and buy-in;
- Learn from other students' unions and universities;
- Target interventions, actions, and communications to the local context;
- Communicate clearly with students on action taken;
- And seek support from sector bodies to overcome challenges and drive continued change.

The DAI programme is now open to all UK universities and students' unions to join and use as a tool to generate whole-campus change. SOS-UK's vision for the future is that all campus cultures will be rooted in drug and alcohol harm reduction, and that students will feel empowered to seek support without the fear of punishment.

## 2.0 BACKGROUND

SOS-UK is a student-led education charity focusing on sustainability, formed as an independent charity in 2019. Our wellbeing work began in May 2014 with the launch of Alcohol Impact, a culture change program designed to support students' unions and universities to promote responsible drinking and make campus life inclusive for all, including those students who choose not to drink. Initially funded by the Home Office, SOS-UK has continued to deliver Alcohol Impact and to date has supported 31 students' union and university partnerships.

## 3.0 AIMS

DAI aims to change the way student drug use is addressed at universities, moving away from the historical zero-tolerance approach to a health-based approach that focuses on harm reduction.

The objective was to design and deliver an accreditation programme that would enable students' unions and university partnerships to support and educate students about drug use, including a clear framework to drive progress, and a package of support for partnerships.

## 4.0 METHODOLOGY

### 4.1 Accreditation

Universities and students' unions participating in the DAI pilot did so in partnership. The four institutions<sup>1</sup> were selected in summer 2020 and work commenced in November 2020. Partnerships then worked through the DAI framework which consists of 53 criteria (Annex 1), including 16 mandatory and a further 37 optional criteria. To achieve accreditation, the partnership must meet or exceed the threshold of 213 points (60% of the 355 points available) and obtain a score in all mandatory criteria. Any partnership that receives 142-213 points is marked as "Working Towards Accreditation".

### 4.2 Partnership support

Each partnership was offered the following support throughout the duration of the pilot:

1. Monthly 1-2-1 telephone support to discuss progress, challenges and plan priorities.
2. One in-person support day per year designed according to partnership needs.

Examples included:

- a) Training of students and staff on alcohol and drug harm reduction, student safety, and drink spiking.
- b) Workshops on forming a joint SU and university drug harm reduction policy.
- c) Scoping sessions and strategy planning with key staff members.
- d) Measuring impact.

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<sup>1</sup> UWE Bristol and The Students' Union at UWE, University of Leeds and Leeds University Union, Keele University and Keele University Students' Union, and University of East Anglia and UEA Students' Union

3. Two group support days per year for all partnerships to share good practice, discuss challenges, and plan future interventions.
4. Ongoing email support as required.

### 4.3 Audit

Three out of the four partnerships were audited within 2 years of commencement of the pilot, taking place between May and July 2022. The audit is completed over two days and is completed by students from that institution. Student involvement in the audit is key to making sure that the policies, practices and support put in place during the pilot were examined by the people best placed to know the experiences of substance use at that institution. Student auditors benefit enormously from the experience through development of transferrable skills and becoming champions for this work in future. 16 student auditors participated in the three audits.

The audit combines a documentary review of evidence and interviews of staff from both the students' union and the university. Student auditors are trained by SOS-UK in auditing and interviewing skills. The students then contribute to an audit and recommendations report which is reviewed and moderated by SOS-UK staff before being provided to the partnership.

## 5.0 IMPACT

Throughout the two-year pilot, partnerships completed 176 total actions relation to reducing harm of drug and alcohol use, with partnerships completing an average of 44 actions.

The following examples of impact focus on drug use, however findings relating to alcohol use can be found in previous reports which can be found at [www.sos-uk.org/resources-file/alcohol-impact-pilot-report](http://www.sos-uk.org/resources-file/alcohol-impact-pilot-report). Impact is difficult to quantify in relation to student drug use and behaviour change, and so many of the following examples illustrate qualitative evidence of action. Through the annual DAI survey, SOS-UK will support partnerships to build an ongoing quantitative evidence base to track changes in student attitudes and behaviours relating to drug and alcohol use.

### 5.1 Improved knowledge and understanding of student drug use

Historically there is little research into student drug use, meaning knowledge has been gained anecdotally from sources such as security reports, welfare support, or ad-hoc conversations with students, providing an incomplete picture of drug use on campus.

All pilot partnerships carried out research into drug and alcohol use at their institution. They analysed the results and presented these to key members of staff across both the students' union and university. This data was also used to understand the types or groups of students where drug use might be more prevalent. This data was not collected prior to taking part in the pilot.

A total of 659 responses were achieved from students at pilot partnerships. Full combined results of this research can be found in Annex 2. Headlines include:

- 20% of students were currently using drugs and 30% of students had used drugs since starting at university.

- The main reasons cited behind drug use are recreation (66%), enhancing social interactions (28%) and boredom (25%).
- Cannabis was reported as the most frequently used drug, with 14% of respondents indicating that they use it every day.
- 30% of respondents don't know if their place of study has a drugs policy.
- 43% say they feel confident that if they turned to their university for support with drug use that it would be dealt with appropriately.
- Respondents who currently use or have previously used drugs say that it has helped them make new friends (49%) but has led to missed university class commitments (44%) and taking risks with personal safety (21%).

## 5.2 Harm reduction statements and policies

All partnerships implemented a comprehensive drug and alcohol policy oriented toward harm reduction and support for students. Examples from the pilot can be found here:

- I. Leeds University Union: [Drugs and Alcohol Policy](#)
- II. Keele University, Keele Students' Union, and Keele Postgraduate Association - [Student Substance Misuse - A Joint Approach](#).
- III. Keele University, Keele Students' Union, and Keele Postgraduate Association - [Harm reduction and supporting students](#) commitment statement.
- IV. University of the West of England [Student Drugs including Alcohol Policy](#). (Currently being reviewed by a workstream chaired by the Dean for Students).

However, having a harm reduction policy in place does not ensure students are aware of support available. The 2017 [Taking the Hit](#) report found that just 35% of students surveyed were aware of their university's drug policy.

Through the DAI pilot, students were asked if they were aware of the drug policy at their university. As shown in Figure 1 below, in all of the four partnerships, students were significantly more aware of their universities' drug policy than the national average.

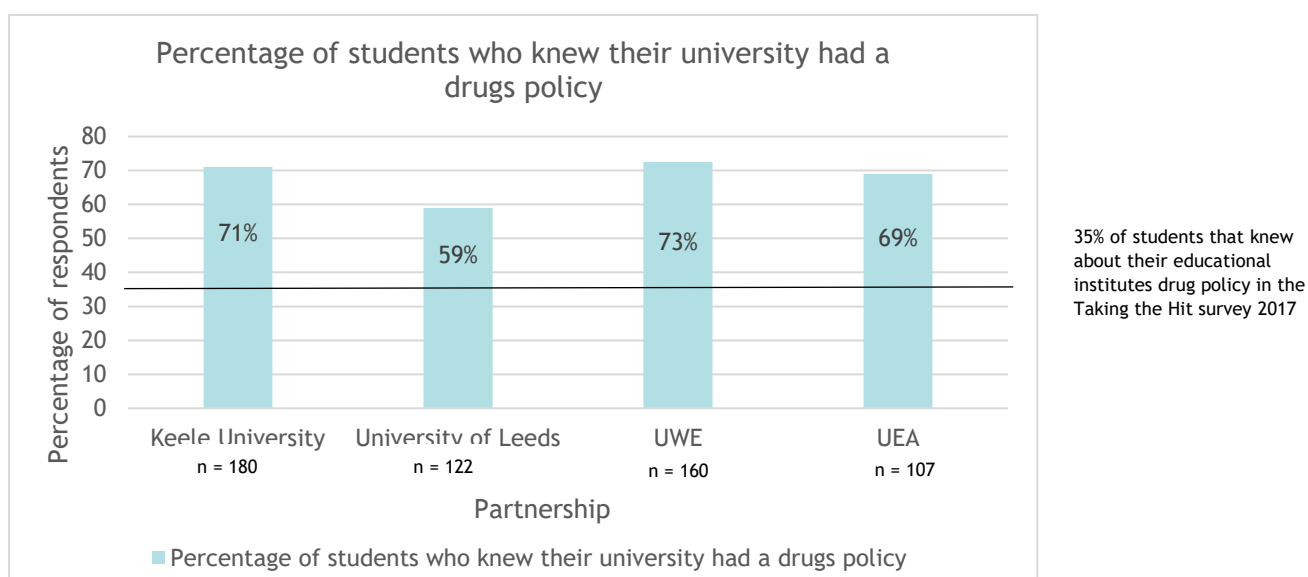


FIGURE 1: PERCENTAGE OF STUDENTS REPORTING KNOWLEDGE OF THEIR UNIVERSITY'S DRUG POLICY, [DRUG AND ALCOHOL IMPACT SURVEY 2021](#)

### 5.3 Increased support for students seeking help

All partnerships increased and improved provision of support for students seeking help with alcohol- and drug-related problems. The following case studies highlight the diverse range of approaches taken, including provision of in-house support, improved external referrals, peer-to-peer support, and help for students in recovery.

#### 5.3.1 Provision of an in-house senior drug and alcohol practitioner

In 2019, the UWE Bristol Wellbeing Service introduced an in-house Senior Drug and Alcohol Practitioner. This role provides support to students using drugs and alcohol, and consults with and trains members of staff across the university. The Senior Drug and Alcohol Practitioner offers one-off harm reduction appointments as well as ongoing structured treatment. The Practitioner also delivers harm reduction awareness sessions for students at key points throughout the year.

In the 2020/21 academic year, the practitioner received 157 referrals. UWE Bristol recorded an increase of 9.8% from the previous year in self-referrals with a 13% decrease in referrals from accommodation, university services and wellbeing teams. This indicates that proactive conversations about the service empowered students to contact the Senior Drug and Alcohol Practitioner directly. This is important because students who self-referred were more likely to engage with the service (96% engaged, as opposed to 67% referred from wellbeing and 24% referred from accommodation).

As shown in Figure 2, having this in-house improves students' take-up of support.

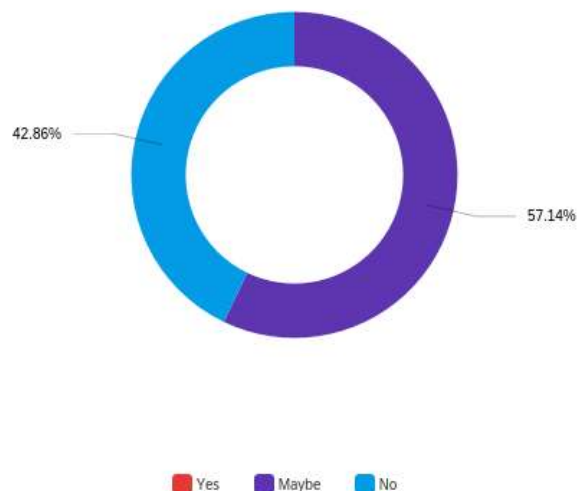


FIGURE 2: SURVEY OF STUDENTS WHO ACCESSED THE UWE BRISTOL DRUG & ALCOHOL SERVICE BETWEEN SEPTEMBER 2021 - MARCH 2022, IN RESPONSE TO THE QUESTION “WOULD YOU HAVE ACCESSED DRUGS AND ALCOHOL SUPPORT EXTERNALLY TO THE UNIVERSITY IF THIS SERVICE

#### 5.3.2 Improved referrals to external support

Prior to participating in DAI, if a student was identified as having alcohol or drug misuse issues at Keele University, they would be signposted to local recovery services via the sharing of a web link, or a physical leaflet. Since starting the pilot, the Student Services team are now proactively offering to make a referral for a student, or will sit with a student to complete a referral form themselves. The partnership is looking at taking this further by exploring data-sharing agreements to support the student post-referral. Keele University has shared the following two student case studies.

#### Case study: Student A

Student B suffered a mental health episode one evening on campus which was attended to by Security and a member of the Residence Life Team. He disclosed having suicidal thoughts and also suffering with significant addiction issues (daily use of ketamine and cocaine). The student was referred through to the Counselling & Mental Health Team as well as community substance misuse service) that day and was allocated a support worker from each team. Initially, the student didn't engage with the substance misuse service, but upon further discussions with members of the Student Services team (primarily Counselling and Mental Health and academic support) he did arrange for an initial appointment with the team to meet his support worker and find out more about how the service can support him.

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## Case study: Student B

Student A was found with a substantial amount of cannabis in their room by security, a university investigation concluded that the student possessed the cannabis with intention to deal and supply. This did mean the student was subject to a major discipline outcome and was withdrawn from the university. However, within that time, the student was allocated a dedicated support contact who helped with the various factors which contributed to the student's issues including his addiction issues (referral to local substance misuse recovery service), financial (offered a hardship loan and signposted to external financial support services) and mental health (referral sent to the student's GP for support). The student regularly engaged with Stars (community substance misuse service) and entered onto a 12-week plan for support.

### 5.3.3 Peer support

Keele University developed a peer-led support scheme, following the finding in the 2021-22 SOS-UK Student Drugs and Alcohol survey which identified that students most often access drug advice and information from their peers, as shown in Figure 3.

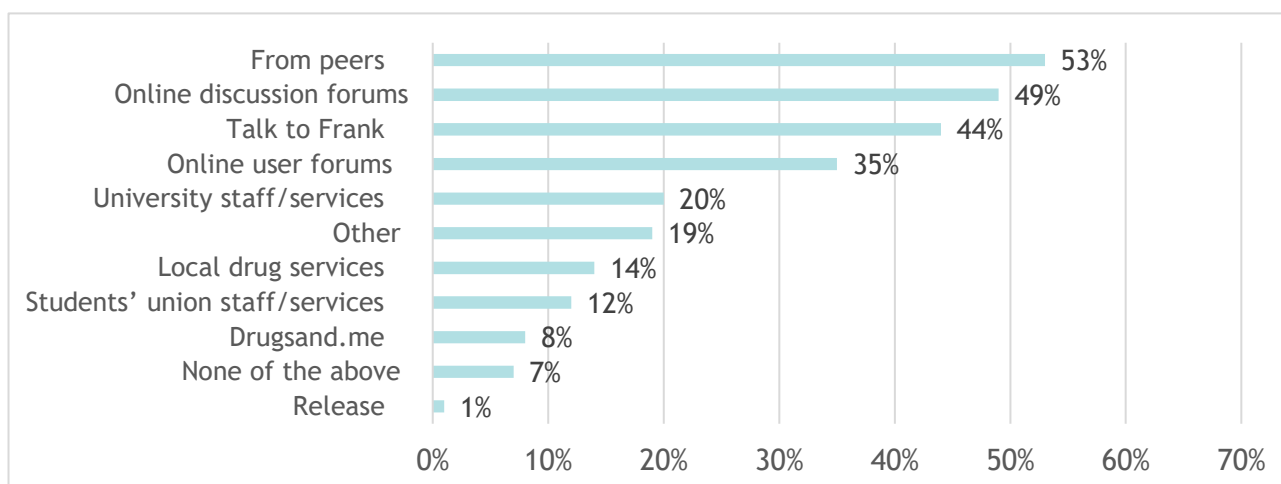


FIGURE 3: [2021-22 SOS-UK DRUG AND ALCOHOL SURVEY](#), QUESTION "WHICH OF THE FOLLOWING BEST DESCRIBES WHERE YOU ACCESS DRUG ADVICE AND INFORMATION?" BASE: 197

The peer supporters provide a listening ear for students who may need someone to talk to about their drug or alcohol issues; signpost students to specialist support services (on or off campus) to ensure that they are supported in the right way for their needs; provide proactive contact with students through drop-in sessions or visits to on-campus accommodation blocks; and work in partnership with the Student Services Team, Students' Union, and the Keele Postgraduate Association on various campaigns such as Dry January and Alcohol & Drug Awareness Week;

### 5.3.4 Support for students in recovery

Keele University has joined the recovery network established by the University of Birmingham. This network assists universities in implementing programmes to support students who are in recovery from alcohol and drugs. In joining the network, Keele University is provided with support and best practice and are now consulting on how to start their own recovery programme.

## 5.4 Harm reduction advice made available to students

### 5.4.1 General harm reduction advice

General harm reduction advice has been made available on webpages, social media and information stands, as demonstrated by examples in figure 4 and 5. The UWE Bristol and The Students' Union at UWE produced a [let's talk about drugs](#) video has been viewed by over 3,200 students and their information video about [Ketamine](#) video by over 1,600 students. This harm reduction advice was not available prior to participation in the pilot.



FIGURE 4: PERSON STAFFING A STAND UWE BRISTOL

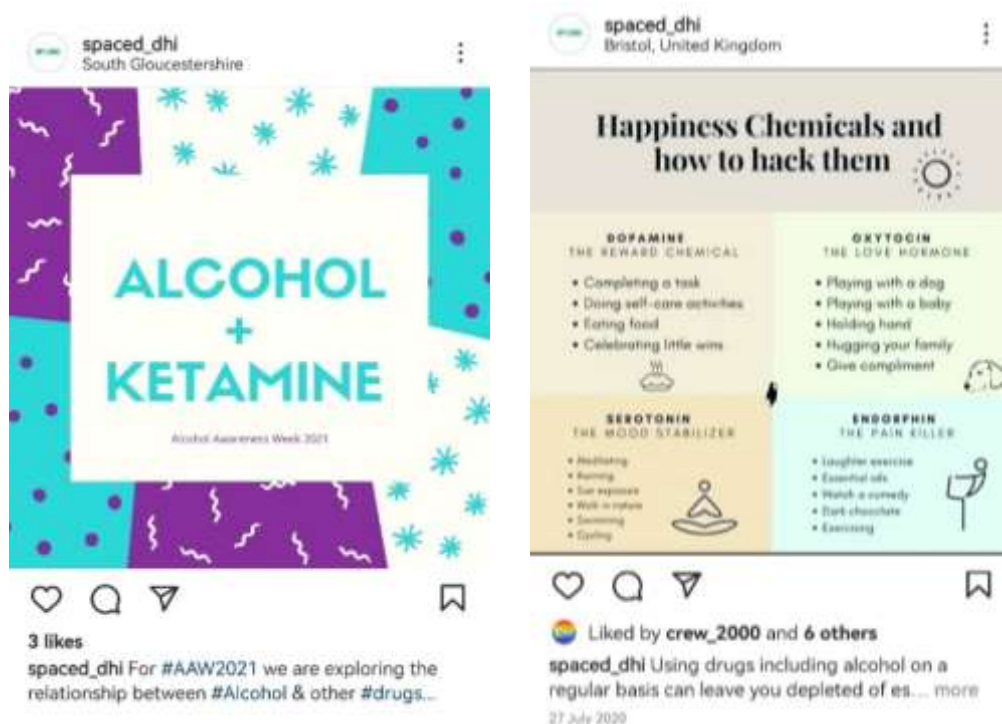


FIGURE 5: SOCIAL MEDIA POSTS FROM UWE BRISTOL

### 5.4.2 Targeted harm reduction advice

In addition to the general provision of harm reduction communications, partnerships have also developed targeted harm reduction advice.

UWE Bristol and The Students' Union at UWE worked together to build a new module for new and returning students as part of our Starting Block activity. This module covered UWE Bristol values and behaviour expectations. It included information on alcohol consumption, social norms and drugs. This message is framed as being kind to each other in the community, staying safe and healthy to thrive. They estimate 6,350 students have viewed the module over the past 2 years. The community module received roughly 3 times more comments in 2021 vs 2020.

A further example demonstrates targeted mental health information. Keele University and students' union developed shared key messages about substance use and mental health on their social media during mental health awareness week. Prior to participating in the programme no such proactive communications had been completed.

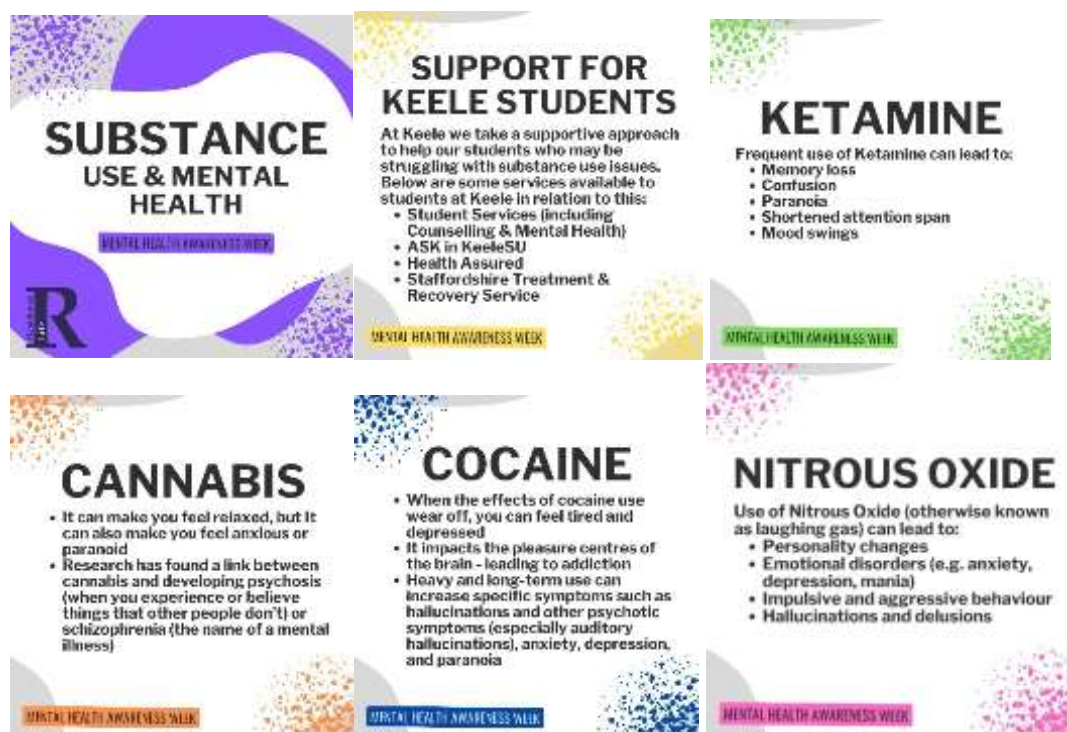


FIGURE 6: EXAMPLES OF SOCIAL MEDIA COMMUNICATIONS LINKING SUBSTANCE USE AND MENTAL HEALTH PRODUCED BY KEELE UNIVERSITY AND STUDENTS' UNION

Finally, UWE Bristol and The Students' Union at UWE produced targeted advice about the risks associated with mixing substances. In addition to links on their websites, the partnership shared social media posts and a [blog](#) on their website. Similarly, Leeds University Union has work underway to develop an education focused drug harm reduction campaign in which information about mixing of substances is given out as business cards that replicate those given out by drug dealers.

### 5.5 New training for staff and student staff roles

While alcohol awareness training has been undertaken by staff and student staff for many years, historically this training included very little around drug use.

All partnerships demonstrated that they now included drug training to key members of staff, including:

- All accommodation staff at UWE Bristol received drugs awareness training.
- All residence advisors at Keele University receive training on drugs and alcohol, university initiatives, and support available.
- All “street team” volunteers at Keele University receive training focussing on handling alcohol and drug-related incidents and support available.
- Leeds University Union introduced Wellbeing Event Reps responsible for providing support to students during alcohol-based events. These reps have received training on identifying students in need of help due to drug use, the support available, and how to engage in conversations about their drug use.

### 5.6 Redevelopment of disciplinary procedures

UWE Bristol and Keele University have both redeveloped their disciplinary procedures to include a greater emphasis on support. Drug-related incidents are now dealt with by a multi-agency approach that includes the wellbeing team. Sanctions are based on a tiered approach including referrals to wellbeing services, warnings, and acceptable behaviour contracts. UWE Bristol has additionally introduced a mandatory drugs awareness course run by an external provider following the first instance of drugs and/or psychoactive substances being found in a student’s accommodation. Evaluation of this is in progress.

## 6.0 FEEDBACK FROM PARTNERSHIPS

Following participation in the programme, each partnership was asked to take part in an evaluation interview with Rachel Drayson, Head of Research and Impact at SOS-UK. A full summary of feedback can be found in Annex 3.

Participants cited the following benefits of participation in DAI to the students’ union and university, including:

- Providing direction for this work;
- Facilitating a joined-up approach between the students’ union and the university;
- Providing a tangible framework of actions to guide and prioritise action;
- Supporting collaboration and sharing of good practice between institutions;
- Providing support and guidance;
- And giving recognition for achievements in this area, which served as especially important in engaging senior management.

**“It enables the conversation about drugs to exist in the context of wellbeing and positive student experience and success, rather than a negative media, sort of perception or a completely legalistic perception.” - DAI interview participant, 2022**

Partnerships also cited a range of challenges identified through the pilot, including:

- A lack of good practice across the sector;
- Unequal participation between the students' union and the university in the partnership working;
- Difficulties in converting plans and policies into action;
- And challenges in recording impact.

Student auditors also provided feedback through the audit process and the reflections from auditors can be found in Annex 4.

**“By working in tandem with each other, the university and students' union can really create a real impact in student lives and improve willingness to study here. The issue of drug and alcohol is very prevalent across the UK and an initiative like this would really help students feel safer and experience the best of university life.” - University of Leeds Student Auditor**

## 7.0 LEARNING AND NEXT STEPS

The DAI pilot demonstrated the positive impact of using a partnership approach and supported change framework to drive action toward universities taking a harm reduction approach to student drug and alcohol use. In order to make the transition from a zero tolerance approach and introduce harm reduction, universities, colleges and students' unions should consider the following factors:

### **Developing a strong partnership between the students' union and university**

To generate wide reaching and sustained behavioral change, students' unions and the university must work in partnership. They should have an agreed set of aims and principles that they can both work towards. An unequal partnership or conflicting practices can result in confusing messages for students and limit the reach of good practice.

### **Bringing together a range of stakeholders in instigating change**

In order to ensure wide-reaching and sustained behavioral change, a range of stakeholders both internal and external should be brought together. This should include wellbeing staff, security, accommodation staff, bar staff, communication teams, community alcohol and drug teams, other members of the nighttime economy, sabbatical officers and students.

### **Senior management must show commitment to supporting a harm reduction approach**

Senior management must demonstrate commitment, this includes allocating budget and resources to enable change, supporting changes in processes and encouraging a multidisciplinary approach.

### **Collaborating with other students' unions and universities**

Successful universities will build relationships with other students' unions and universities. Having peer to peer support in other institutions and working through issues together will be beneficial to problem solving, and allow for guided reflection.

### **Targeting interventions, actions, and communications based on local context**

While a number of the actions to improve the wellbeing of students will be similar across the UK, it is important to use evidence of the concerns or situation at individual campuses to ensure impactful interventions. This might include which drugs are being used by students, the demographics, locations of use, motivations, or supply routes. Research should be gathered to gain a picture of student drug use at individual campuses.

#### **Communications with students are key**

Whilst acknowledging not all information can be shared, in order to change the norms around student alcohol and drug use, universities and students' union must ensure they communicate their approach and the support available.

#### **Regular support can help overcome challenges and drive continued change**

Universities and students' unions should look to set up a relationship with those in the sector that can provide support and information. This includes local community drug services, NHS services and harm reduction organisations such as Release or Neurosight.

Following the successful completion of the pilot programme in October 2022, SOS-UK launched Drugs and Alcohol Impact as part of its suite of university engagement and education programmes. It is now open to any interested partnerships and funded on a pay-for basis, with partnerships paying an annual membership fee.