SAN DIEGO STATE UNIVERSITY

Report from the Presidential Task Force on Alcohol and Substance Misuse
SDSU is a Proud Latinx Serving Institution located on Kumeyaay land

FINAL
July 10, 2020
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Executive Summary

The Presidential Task Force on Alcohol and Substance Misuse and the Task Force on Student Activities were launched by San Diego State University (SDSU) President, Adela de la Torre, on November 12, 2019 to identify “near-term and long-term recommendations to enhance the SDSU student experience to help ensure student safety and student success” (San Diego State University Office of the President: Presidential Task Force Groups).

The official charge of the Presidential Task Force on Alcohol and Substance Misuse was to identify and assess national models for evidence-based practices and contemporary patterns of substance misuse among college populations. The Presidential Task Force was to use its expertise to develop and recommend innovative strategies to decrease risk behaviors and the negative outcomes that result from substance use and misuse on the SDSU Campus. The Presidential Task Force was composed of content experts both internal and external to SDSU, including faculty, students, parents, staff and administrators, and leveraged further evidence-based practices, research and subject-matter experts and researchers across the nation. The Task Force met monthly starting in January 2020 and ending in July 2020, completing this report.

Recommendations were framed using the Comprehensive Alcohol and Other Drug Strategy as our framework, where we organized target activities and recommendations by the following domains: (1) **Motivation Focus** to promote changes in student attitudes surrounding alcohol and other drugs (AOD) and reduce motivations to use or abuse AODs; (2) **Behavioral Alternative** to provide opportunities for students to act responsibly while fulfilling developmental and social needs; (3) **Enforcement & Access** to strategically reduce access to alcohol and other drugs (AOD) to prevent and limit Consumption; (4) **Community Action** to identify community action and involvement within the campus and at the broader community level; and (5) **Evaluation and Research** activity should be developed within a research-based evidence framework, and when possible, evaluated within an environment of rigorous scientific methods that enable measurement of improvements in individual and public health outcomes, cost-efficiencies, program sustainability, and continuous program Improvement.

**An overview of recommendations includes:**

1. **Motivation Focus**
   - Increase ongoing student access to eCHECKUP TO GO (online substance use prevention and intervention tool) and ASPIRE (one-on-one, Motivational Enhancement Treatment to reduce AOD-related behavior).
   - Develop a collegiate recovery program for students in recovery, including cultural tailoring where possible, to increase relevance to and inclusivity of a broader population of students from different backgrounds and identities.
   - Adapt and implement a campus Screening, Brief Intervention, and Referral for Treatment (SBIRT) program.
(2) Behavioral Alternatives

- Increase the budgets of the Aztec Nights and Live Well Late Night in order to improve student experience with and engagement in non-AOD social events.
- Assign as a priority, a staff member’s responsibility to assure regular programming on campus that can attract a large number of students late into the evening.

(3) Enforcement & Access

- Establish and enforce an SDSU community-wide “dry period” during the first six weeks of the fall semester. This dry-period should include members of the fraternity and sorority community and be extended to all students, paying special attention to intramural club sports, athletic teams, and registered student organizations. We suggest that this dry period be timed to coincide with Aztec Nights, and enhanced by a social media campaign and increased neighborhood enforcement targeting house parties.
- Further engage diverse SDSU student groups (e.g., cultural identity and LGBTQ+-focused organizations) to help plan and support “dry period” and related activities.
- Reimagine and redevelop, through meaningful engagement of diverse campus and community partners, alcohol-related community policing program in the College Area.

(4) Community Action

- Re-establish a coalition of campus and community members (“Town-Gown Coalition”) related to reducing alcohol access and sales to students.
- Build on existing processes, and lessons learned from development of the Aztec Student Union and South Campus Plaza, establish an effective consultative relationship with the planning committee to address alcohol control measures related to the SDSU stadium development.

(5) Evaluation and Research

- The membership of the standing AOD Task Force should be expanded to include a broader range of campus and community partners. (see Appendix 3 for current campus-wide representation)
- The standing AOD Task Force should: i. oversee an AOD monitoring survey to evaluate ongoing efforts and guide campus AOD prevention and outreach planning and ii. align with other existing and/or proposed behavioral-health related task forces, to include the Sexual Violence Task Force, and the proposed Hazing Task Force.

Conclusions

This Presidential Task Force identified specific interventions and activities that will help prevent alcohol and drug misuse and promote the health and wellbeing of SDSU students. Importantly, recommendations make good use of existing SDSU resources and infrastructure, such as the online AOD online behavior change tools developed at SDSU, our Well-being & Health Promotion Department, and the standing AOD Task Force. We recognize that specific efforts to increase effectiveness of AOD prevention and treatment outreach to and support for Black, Indigenous, and other communities of color and LGBTQ+ communities are critical. The deliberate addition of new and diverse perspectives in AOD prevention and programming are
key as are continued efforts to bridge communication between different campus and off-campus stakeholders and organizations.

Introduction

In November 2019, President Adela de la Torre initiated the development of The Presidential Task Force on Alcohol and Substance Misuse in response to growing campus and community concerns about the risky use of alcohol and other drugs among SDSU students. The Presidential Task Force was charged by President de la Torre to: 1) Review behaviors, trends, prevention, policies and responses related to alcohol and other drug use at San Diego State University, 2) Identify and assess evidence-based practices for reducing risky substance misuse among students, and 3) Develop and recommend innovative strategies and interventions designed to reduce substance using behaviors and their resulting negative outcomes among students. SDSU is a large, urban, public university. Located on Kumeyaay territory, it is a proud Latinx-serving institution with a student population of more than 34,000, of which more than 7,000 typically reside on campus.

To address the specific needs of the SDSU campus related to substance misuse, a diverse group of faculty, students, parents, staff and administrators, both internal and external to SDSU (see Appendix 1) comprised the Presidential Task Force. Beginning in January 2020, the Presidential Task Force met monthly with the goal of producing a final report with specific recommendations to President de la Torre in July 2020. For the first meeting, the committee outlined a schedule of topics for our meetings over the next six months.

Presidential Task Force members agreed that the first step of this process was to collect and review all of the initiatives on the SDSU campus that address alcohol and other drug misuse (e.g., environmental scan) including review of the current charge of SDSU's standing AOD Task Force. This was accomplished during the February meeting when Caryl Montero-Adams (Student Life and Leadership) and Stephanie Galia (Well-being & Health Promotion) presented an overview of all the initiatives on the SDSU campus that address alcohol and other drug use, hazing, and sexual violence (see Appendix 2). The Presidential Task Force recognized that SDSU already has an existing robust and comprehensive evidence-based set of programs and policies on which the Presidential Task Force could build.

The Presidential Task Force members decided the next step would be to gather and analyze best practices. The team used the National Institute of Alcoholism and Alcohol Abuse’s CollegeAIM (Alcohol Intervention Matrix) tool as a guide to substance misuse programming best practices (see Appendix 2). The CollegeAIM tool (see Appendix 2) presents evidence-based individual and environmental interventions designed to reduce harmful alcohol use on college campuses. Information about these individual and environmental interventions are presented in a matrix format that includes information about intervention efficacy and effectiveness, cost, barriers to implementation, and the amount of research support. The team utilized the
CollegeAIM tool to: 1) evaluate current SDSU substance misuse programming, 2) identify and prioritize gaps in SDSU-specific programming, and 3) develop new ideas for additional programming.

Using information from the environmental scan and the CollegeAIM tool, the Presidential Task Force developed a set of recommendations grouped into five broad categories: Motivational/Individual focused programs, alternative programs, access limitation and enforcement policies, community action, and evaluation, implementation and continuous quality improvement.

In addition to regularly scheduled meetings, a town hall was held the second week in March (3/9/20) where several members from both Presidential Task Forces (Presidential Task Force on Alcohol and Substance Misuse and the Task Force on Student Activities and Safety) presented the plans and activities of each group. The town hall was open to the greater SDSU community (e.g., faculty, staff, students, and college area community members) and included time for an open forum for comments and concerns to be heard.

Overview of Committee Meeting Dates and Discussions

January 11, 2020 The Presidential Task Force on Alcohol and Substance Misuse met for the first time and in person with SDSU President Adela de la Torre and Chief of Staff Brittany Santos-Derieg to discuss the charge of the Presidential Task Force and committee timeline. Elizabeth Davis, Budget and Operations Analyst, Office of the President, introduced herself and provided administrative support to the Presidential Task Force across meetings. Ms. Davis also set up a Google share drive where Committee members could upload and share information.

February 12, 2020 Dr. Mark Reed initiated a process to gather substance use prevention programming that may be occurring within specific departments and schools at SDSU. He found that currently no colleges were providing any specific programming on AOD; however, the department of Administration, Rehabilitation & Postsecondary Education and School of Social Work offer internships to students in the area of substance use counseling.

Caryl Montero-Adams (Director, Student Life and Leadership) and Stephanie Galia (Director of Well-being & Health Promotion) presented a thorough overview of the educational initiatives currently taking place on the SDSU campus that address alcohol and other drugs, hazing, and sexual violence. The committee then discussed a report about student transport data (e.g., transports to the hospital for alcohol and drug-related issues) from fall 2014 to fall 2019.

March 11, 2020 This was a joint meeting that included members from the Student Activities Presidential Task Force as well as the Alcohol and Substance Misuse Presidential Task Force. The meeting allowed for sharing progress and planned activities and focal areas from respective
task forces. The Alcohol and Substance Misuse Presidential Task Force presented efforts to identify evidence-based programs to address alcohol and other drug misuse on campuses, review of extant programs and gaps in programming.

Members discussed the need to coordinate efforts to avoid duplication. Additional key discussions included: use of Smart Goal Framework; identification of individuals or departments that could support the successful implementation of recommended changes and the need to include and honor the experiences of current students.

April 8, 2020 Discussed strategic use of existing AOD prevention programming, resources and infrastructure at SDSU. Next steps would be development of a draft report that would include screening of students who may need information, intervention and/or recovery services; alternative activities for student involvement; and policies to reduce access to substances.

May 13, 2020 On behalf of the Presidential Taskforce on Student Activities, Task Force member Dr. Randy Timm attended the meeting as a guest to present their draft report. Dr. James Lange crafted an outline of the Presidential Task Force report that was shared with the group for input. Members identified additional SDSU and National resources that should be included in the Report. Members discussed possible faculty touchpoints related to student alcohol and AOD use as well as how COVID-19 could affect alcohol and drug use on campus (including the surrounding campus neighborhoods where many students live) for the next academic year.

June 10, 2020 Presidential Task Force members discussed the need for cultural tailoring of prevention services and treatment outreach to better meet the needs of underrepresented students. They identified the explicit need to expand inclusion of diverse perspectives from cultural and ethnic identity groups to campus AOD prevention and treatment efforts. A report titled “The Color of Drinking” (University of Wisconsin-Madison) had been circulated by Dr. Lange and was discussed by the group for insights on how to better support students of color.

Members then used Zoom screen sharing capabilities to conduct a detailed “live” review of the draft Report and make edits and comments where additional information was needed.

July 8, 2020 Presidential Task Force members met for the last time to discuss and finalize report recommendations.
Recommendations from the Presidential Task Force on Alcohol and Substance Misuse

Alcohol and Other Drugs (AOD) misuse pose a potential risk to the health, safety and educational and occupational experiences of our students and staff. Further, the negative impact of student AOD abuse is often felt in the broader community through noise, vandalism, vehicle crashes, and use of community resources such as police and paramedics. Therefore, we seek through our AOD programs to elevate student knowledge about AOD, to improve engagement of all students in prevention and treatment support efforts, and reduce and prevent problems associated with alcohol and other drug use in our SDSU campus community.

National Institute on Alcohol Abuse and Alcoholism (NIAAA) Recommendations for Colleges and Universities

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) has recommended a set of evidence-based programs (see CollegeAIM tool 3) designed to prevent and reduce harmful alcohol use by college students. These programs are classified by their tier, with lower tier programs (e.g., Tier 1) having substantial research evidence to support their efficacy. After careful review, the Presidential Task Force noted most of the programs offered at SDSU could be considered effective. Those that were not primary fit within the broad category of “education”. The Presidential Task Force noted that given the need for a base-level of AOD health literacy among our students, it is reasonable to continue to provide AOD education as part of a comprehensive strategy to prevent and reduce use of AOD.

The Presidential Task Force then set out to find programs, policies or practices that could either fill in identified gaps or expand the reach of existing efforts. Below are the recommendations organized around the elements of the comprehensive model that guides our work.

Commitment to Equity and Inclusion in AOD Prevention and Treatment

Presidential Task Force members assert the need to address structural racism in the design and implementation of AOD prevention and treatment strategies and interventions that may not have been developed to meet the needs of and engage underrepresented communities. We further see a need to examine, understand and, where indicated, develop more effective AOD prevention and support strategies that will engage and include all SDSU students. The deliberate addition of new and diverse perspectives in AOD prevention and programming are key, as are continued efforts to bridge communication with diverse stakeholders and organizations. This may include new efforts to culturally tailor AOD prevention, treatment and recovery interventions, and improve the cultural effectiveness of outreach efforts and
programming. These efforts can be informed by improved collaboration with and engagement of SDSU’s diverse identity and cultural centers to promote more inclusive language and approaches to AOD prevention and efforts to reduce AOD consumption and associated harms.

COVID-19 Caveat

The Presidential Task Force was given its charge prior to the implementation of social and business restrictions put in place in response to the COVID-19 pandemic. For the most part, our recommendation assumes an eventual return to most of the previous environment, including on-campus housing, fraternity- and sorority-organization housing, club and recreational sports organizations. We also note that some programs have been adapted to be offered remotely, including the Alcohol and Substance Prevention Intervention Redirection Effort program (ASPIRE), provided by Counseling & Psychological Services, AOD health education, some support groups, and social marketing. However, as we note in the recommendations below, a primary concern is the identification of at-risk students, and we acknowledge that with the reduction of contact points--such as Resident Advisors among residence halls--that concern will be heightened prior to more normal operations.

Description of Alcohol and Other Drug Program Elements

SDSU has followed a comprehensive model for AOD prevention/intervention designed to enhance each program operating on campus to synergistically fit with other programs, maximizing the effectiveness of all related efforts. However, we have also allowed individual departments to offer unique and tailored programs for various student populations and needs.

Guiding Framework: Comprehensive AOD Prevention Strategy

Our comprehensive AOD strategy includes elements from five interacting domains (see Figure). The idea of the model is to put into place a system whereby we: (1) **Motivation Focus**: Promote changes in student attitudes surrounding AOD and reduce motivations to use or abuse AODs;
(2) **Behavioral Alternatives:** Provide opportunities for students to act responsibly while fulfilling developmental and social needs; (3) **Enforcement & Access:** Strategically reduce access to AODs to prevent and limit consumption; (4) **Community Action:** These domains act both within the campus and at the broader community level and thus often require community action and involvement; and (5) **Evaluation and Research:** Finally, all programmatic activity should be developed within a research-based evidence framework, and when possible, evaluated within an environment of rigorous scientific methods that enable measurement of improvements in individual and public health outcomes, cost-efficiencies, program sustainability, and continuous program improvement.

It was with this AOD prevention and intervention strategy that the Presidential Task Force began its work by identifying and evaluating the existing programs. Following we describe in detail each of strategy’s five domains with corresponding recommendations.

**1. Motivational/Individual Focused Programs**

The Presidential Task force noted that SDSU currently offers highly effective programs in AOD prevention and treatment, specifically ASPIRE and the eCHECKUP TO GO suite of online interventions for alcohol use, cannabis use, sexual violence prevention, and nicotine use. Currently all new students are required to complete the Alcohol eCHECKUP TO GO program prior to their second semester. The ASPIRE program is a one-on-one counseling program housed within Counseling & Psychological Services (C&PS). It is available free for all students, however the substantial majority of students who enroll are mandated to do so through sanctions imposed because of AOD-related student code of conduct violations. In those mandated cases, the student must also pay a $100 program fee.

The Presidential Task Force noted a primary goal of the AOD programs at SDSU must include the identification of students who are at risk for AOD-related harms. While the universal application of eCHECKUP TO GO serves that purpose for first-year freshmen and transfer students, it then becomes far less utilized by sophomores and above. The ASPIRE program is primarily being used as a tool to prevent recidivism among a high risk group, however it is triggered most commonly among students in the residence halls, the population most closely supervised by SDSU staff. All other students rarely encounter this program regardless of their AOD risk.

**Recommendations**

With this understanding, the Presidential Task Force recommends the following to enhance the identification of at-risk students, prior to incidents and harms, and provide a more accessible path to existing programs:
● Increase access to ASPIRE. Increased access includes removing barriers such as fees for ASPIRE when referrals/mandates are made in peer-to-peer situations.

● Increase access to eCHECKUP TO GO programs. We recommend multiple, required administrations of the Alcohol eCHECKUP TO GO over the course of students’ matriculation (e.g., sophomore year) and increased promotion of other eCHECKUP TO GO programs, like the Cannabis and Nicotine eCHECKUP TO GO programs. Additionally we recommend the eCHECKUP TO GO programs be administered to targeted student populations (e.g., student athletes, fraternity and sorority members) regardless of class standing.

● Develop a collegiate recovery program for students in recovery, including cultural tailoring where possible, to increase relevance to and inclusivity of a broader population of students from different backgrounds and identities. The program should follow best-practices for campus-based recovery programs including a physical space, housing, staffing and a dedicated budget. Based upon the most recent (2018) American College Health Association-National College Health Assessment (ACHA-NCHA) survey of SDSU students, we estimate approximately 430 undergraduates received a Substance Use Disorder (SUD) diagnosis in the past 12 months. Noting that many students may have received their SUD diagnosis prior to the past 12 months, and perhaps far more who do not receive a formal diagnosis, we expect that several thousand SDSU undergraduates could benefit from recovery programming and a culture of supporting students in recovery.

● Adopt and implement a Screening, Brief Intervention, and Referral for Treatment (SBIRT) program. SBIRT programs have been demonstrated to effectively reduce alcohol and other drug misuse, as well as move risk-identified individuals towards treatment and change. SDSU piloted SBIRT within the Student Health Services, which conforms to the traditional placement for such a program. Given that SHS has recently undergone organizational change, it is recommended that we again try to implement an SBIRT there. Clinicians in Counseling & Psychological Services (C&PS) are trained to provide brief intervention at the time of screening and a referral to treatment at a later time at C&PS. In addition.

● SBIRT offered outside the SHS location would broaden the reach of the service and identify many students who would otherwise not use the SHS services. Therefore, we also recommend the deployment of an SBIRT program online. The Higher Education Center for Alcohol and Drug Misuse Prevention and Recovery (HECAOD) has available such a program called “ScreenU.” The ScreenU program is a very brief assessment with tailored individualized feedback. It takes substantially less time than the eCheckUpToGo online intervention and can therefore be placed in more settings. Campuses across the nation have used it either as an assigned requirement or placed within course syllabuses. It is also sometimes used as a prelude to one-on-one interactions in office settings. We recommend that the standing AOD Task Force recommend and oversee its deployment.
to assure its breadth of reach. Since Dr. James Lange serves as the HECAOD Executive Director, the ScreenU program can be made available to SDSU without cost. Note also that Dr. Clapp was the previous HECAOD Executive Director and helped develop ScreenU.

- Develop a robust communication campaign that is revisited annually to further make SDSU students, faculty and staff aware of AOD resources. This task can be assigned to the standing AOD Task Force. Elements of this communication campaign may include the development of a mobile phone/personal device application that details AOD resources for students and SDSU community members.

- Build AOD resources into the Basic Needs Toolkit currently being developed by SDSU’s Well-being & Health Promotion department as one element of the campaign.

- Develop and test the following pilot programs: 1) an alcohol poisoning education program and 2) a keg regulation program.

2. Behavioral Alternative Programs

Expand the reach of alternative programs beyond the Aztec Nights and Live Well Late Night programs. This could be accomplished by assigning a staff member to be charged with ensuring weekly night-time events throughout the academic year. This effort can also be more easily expanded to other areas of the campus community, such as academic departments with the help of a single person who coordinates such events.

Recommendations

- **Increase the budget of the Aztec Nights and Live Well Late Night budgets** in order to improve student experience with and engagement in non-AOD social events. The budget for Aztec Nights has not been increased since its inception in 2008. Since then, costs have gone up, and the program has been forced to reduce the number of events, and at times limit the attractiveness of events (for instance, not serving food) and thus reducing its impact. A substantial increase in costs has occurred because of the need for paid security and fencing as well.

- Assign as a priority, a staff member’s responsibility to assure regular programming on campus that can attract a large number of students late into the evening. This person would be able to coordinate with academic, student life, athletics, and AS programming to intentionally craft a calendar of activities that extend beyond what can be offered by the Aztec Nights and Live Well Late Night programs.
3. **Enforcement & Action**

**Access-limitations, Enforcement and Policies to reduce exposure opportunities and pressure to misuse Alcohol and Other Drugs**

Since 2008, SDSU has established a “dry period” for the first 5 weeks of the fall semester. The intention of this policy was to allow for the acclimation of new students to SDSU without the presence of large alcohol parties. It also serves to focus social gatherings on campus through the Aztec Nights events. In application, the dry period applies to “approved” social events by the fraternity and sorority organizations. However, through our investigation, the Presidential Task Force has learned that other student groups, such as club sports, have been hosting large, alcohol-serving parties during this period.

**Recommendations**

- Establish and enforce an SDSU community-wide “dry period” during the first six weeks of the fall semester. This dry period should include members of the fraternity and sorority community, all SDSU intramural club athletic teams and registered student organizations. We suggest that this dry period be timed to coincide with Aztec Nights and enhanced by a social media campaign and increased neighborhood enforcement targeting house parties.

- Further engage diverse SDSU student groups (e.g., cultural identity and LGBTQ+ communities) to help plan and support “dry period” and related activities.

- Reimagine and reconstruct a comprehensive community policing model in the College Area that is inclusive and respectful of diverse community perspectives and needs, especially as they relate to AOD issues. Assess and make indicated adjustments to current practices so as to improve student health and well-being through AOD prevention, problem-solving, community involvement, and promotion of equitable and effective community partnerships (Fisher-Stewart 2007).

4. **Community Action**

Recognizing that a large proportion of the AOD misuse occurs off campus property, and from alcohol and drug sources not directly under the control of SDSU or its affiliates, working with the neighboring and broader community is important. Indeed, it is both an NIAAA recommended strategy, and a part of the successful SDSU program developed and tested in the past.

**Recommendations**

- Re-establish a coalition of campus and community members (Town-Gown Coalition) related to alcohol access and sales. This group should include members of the SDSU community, local alcohol retailers (both “on-sale” and “off-sale”), law enforcement, and
community representation from the College Area. The focus of the coalition should include responsible beverage service and sales and mitigation of student-resident alcohol-related problems (e.g., noisy parties, etc.).

- Build on existing processes, and lessons learned from development of the Aztec Student Union and South Campus Plaza, establish an effective consultative relationship with the planning committee to address alcohol control measures related to the SDSU stadium development. Items that may be recommended include ensuring outlet density and alcohol availability be carefully planned with an eye toward public health.

5. Evaluation, Implementation, and Continued Improvement Recommendations

The Presidential Task Force recognizes that even with the full adoption of the recommendations, the work of campus AOD prevention and intervention will not be complete. There will necessarily be a need for continuous monitoring of AOD related issues to (a) identify further gaps, (b) adopt an ever-advancing menu of effective programs, and (c) improve existing efforts. Therefore, we recognize a need for the previously standing AOD Task Force to lead next steps towards implementation of Presidential Task Force recommendations.

Recommendations

- Review membership of the standing AOD Task Force in order to expand membership to include a broader range of campus and community partners. (see Appendix 3 for listing of current campus-wide membership representation on the standing AOD Task Force)

- Update the charge of the standing AOD Task Force and make explicit that it has the following responsibilities:

  1. Assure compliance with the Drug Free Schools and Community Act, including the notification and reporting requirements.

  2. Oversee regular population AOD monitoring survey to evaluate ongoing efforts and guide planning, with an Improvement Science approach as well as periodic efforts conforming to basic epidemiological approaches. Example of collegiate alcohol assessment and reporting from the University of Wisconsin-Madison, University Health Services, may provide examples of types of assessment that can be implemented (see U of W-M Color of Drinking report in Appendix 2)

  3. Align with other existing and/or proposed behavioral-health related task forces, to include the Sexual Violence Task Force, and the proposed Hazing Task Force.
Available Resources to Support Presidential Task Force Recommendations

Within the SDSU Well-being & Health Promotion Department, there are currently two team members with dedicated responsibilities to support AOD initiatives. They include the AOD Coordinator (currently at 50% time) and a Health Educator funded from the cost recovery of the AOD Coordinator’s buyout. While the Well-Being & Health Promotion Department should be responsible for the general stewarding of the items in this proposal, in close collaborations with the standing AOD Task Force, these efforts will require broad campus support.

Critical SDSU Campus partners include representatives from:
- Assistant Deans
- Associated Students
- Center for Student Rights and Responsibilities
- Counseling and Psychological Services
- Division of Diversity and Innovation
- Faculty from across the Campus with relevant interest and expertise
- Residential Education
- Student Health Services
- Student Life and Leadership
- Strategic Communications
- University Police
- University Senate

We would also recommend including off-campus partners and establishing a subcommittee that includes community members who have an impact on the availability of alcohol. These can include restaurant and store managers of establishments in South Campus Plaza and others near campus.

Moreover, we acknowledge that the existing staffing and resources allocated to the Well-being & Health Promotion department and the standing AOD Task Force are not sufficient to execute the recommendations outlined in this report. We assess that we would need approximately $529,300 annually to successfully accomplish the recommendations as currently outlined. There is an existing President's Budget Advisory Committee (PBAC) allocation to Well-being & Health Promotion of $39,813.00. These funds could be partially reallocated to offset a portion of the budget requests. (Please see Annual Budget for AOD Prevention Activities in Appendix 4).
Conclusions

The recommendations presented in this Report by the Presidential Task Force on Alcohol and Substance Misuse identify specific points of intervention and activities that will help prevent alcohol and drug misuse and promote health and wellbeing among SDSU students. Importantly, the recommendations make good use of existing SDSU resources and infrastructure, such as the online AOD screening surveys developed at SDSU, our Well-being & Health Promotion Department and the standing AOD Task Force.

If provided with the necessary resources outlined in this report, the Department and standing AOD Task Force are very well suited to design and implement a plan of action for Report recommendations. The Presidential Task Force also recognizes that more must be done to increase effectiveness of AOD prevention and treatment outreach to and support for communities of color and LGBTQ+ communities. The deliberate addition of these new and diverse perspectives in AOD prevention and programming are key as are continued efforts to bridge communication between different campus stakeholders and organizations to further promote the wellbeing of the SDSU campus community.
Presidential Task Force Membership

John Clapp (Co-Chair)
University of Southern California Professor of Social Work and SDSU Alumnus

Maria Luisa Zúñiga (Co-Chair)
SDSU Professor, School of Social Work, Campus Director, Joint Doctoral Program in Interdisciplinary Research on Substance Use

Mark B. Reed
SDSU Professor and Associate Dean for Research, College of Health and Human Services

Ron Smith
Alumnus Advisor, Sigma Phi Epsilon Fraternity

Jim Lange
SDSU Coordinator of Alcohol and Other Drug Initiatives; Adjunct Professor in the Department of Psychology and School of Social Work; Doctoral Faculty in the School of Public Health; Research Fellow in the Center for AOD Studies and Services; Executive Director of the Higher Education Center for Alcohol Misuse Prevention and Recovery

Andrea Dooley
SDSU Associate Vice President for Student Affairs

Jennifer Rikard
SDSU Counseling and Psychological Services Director

Christina Checel
Deputy City Attorney for the City of Los Angeles; SDSU Aztec Parent Advisory Board Member

Richard J. Moyer III
SDSU Research Foundation Network Analyst; Co-author of the eCHECKUP TO GO programs

Jeremy Garcia
Counseling and Psychological Services Peer Educator; Wellness Chair for Phi Delta Theta

Liana Marin
Alpha Gamma Delta Sorority, Past President; Commuter Center Mentor

Administrative Support
Elizabeth Davis
Budget and Operations Analyst, Office of the President at San Diego State University
Appendix 1

SDSU Resources for prevention and treatment of AOD use

ASPIRE, offered through Counseling and Psychological Services
https://sa.sdsu.edu/cps/our-services-and-programs/aspire

Aztec Nights
https://as.sdsu.edu/aztecnights/

eCheckup to Go http://www.echeckuptogo.com/

Educational Initiatives to Address Alcohol and Other Drugs, Hazing, and Sexual Violence at SDSU
https://drive.google.com/file/d/1Lt956C0Fof5DKVkuPuUDIJKL2xhrW0MN/view?usp=sharing

Peer Health Education, offered through Well-being and Health Promotion
https://sa.sdsu.edu/health-promotion/get-involved/become-a-phe


SDSU Well-Being & Health Promotion: AOD resources (policies, presentations and reports)
https://sa.sdsu.edu/health-promotion/a-z-index
Appendix 2

References and Additional Resources


San Diego State University Office of the President: Presidential Task Force Groups https://president.sdsu.edu/moving-forward/task-force-groups

Appendix 3

Standing AOD Task Force (July 2020)

Campus wide representation of standing AOD Task Force Membership represents the following campus departments/units and initiatives:

- Athletics
- Aztecs for Recovery
- Aztec Recreation
- Campus Diversity
- Center for Student Rights and Responsibilities
- Counseling & Psychological Services
- Fraternity & Sorority Life
- Government and Community Relations
- Recreation and Wellness Chair (student voice)
- Residential Education Office
- School of Social Work
- Student Health Services
- Student Life and Leadership
- University Police
- Well-being & Health Promotion
## Appendix 4
### Annual Budget for AOD Prevention Activities

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>eCHECK UP TO GO &amp; ASPIRE</td>
<td>Provide up to 100 students with access through referral from an RSO</td>
<td>$10,000.00</td>
</tr>
<tr>
<td></td>
<td>Provide up to 100 students annually with access through on-campus stakeholders (departments, Assistant Deans, etc.)</td>
<td>$10,000.00</td>
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<tr>
<td></td>
<td>Implement an SBIRT program at SHS with C&amp;PS staff</td>
<td>Range: $50-100K annually</td>
</tr>
<tr>
<td></td>
<td></td>
<td>$50,000.00</td>
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<tr>
<td><strong>Recovery</strong></td>
<td>Hire a Health Educator with a background and expertise in recovery science to create and sustain a recovery community (including programming, evaluation, peer group oversight, affinity group creation for residence halls, and continued evaluation and attention to racial disparity)</td>
<td>$79,000.00</td>
</tr>
<tr>
<td></td>
<td>Incentives and operational budget for recovery programs</td>
<td>$7,500.00</td>
</tr>
<tr>
<td></td>
<td>Student Assistant to support efforts and physical space</td>
<td>$19,600.00</td>
</tr>
<tr>
<td></td>
<td>Operational costs for a physical space</td>
<td>$20,000.00</td>
</tr>
<tr>
<td><strong>Evaluation</strong></td>
<td>Annual incentives for student participation in evaluations</td>
<td>$10,000.00</td>
</tr>
<tr>
<td><strong>Aztec Nights</strong></td>
<td>Concentrated programs in the first five weeks and one a week thereafter for the rest of Fall and continuing in Spring. This budget increase would allow for an additional 11 programs in the Fall and 15 in the Spring at an average of $5,000 each</td>
<td>$130,000.00</td>
</tr>
<tr>
<td></td>
<td>Dedicated budget for Live Well Late Nights</td>
<td>$20,000.00</td>
</tr>
<tr>
<td></td>
<td>Marketing Costs</td>
<td>$25,000.00</td>
</tr>
<tr>
<td></td>
<td>SSP II Staff Member who can assist with implementation of these events</td>
<td>$79,000.00</td>
</tr>
<tr>
<td><strong>Communication Campaigns</strong></td>
<td>Material and production costs</td>
<td>$15,000.00</td>
</tr>
<tr>
<td><strong>Development and Implementation of an Alcohol Poisoning Education Program</strong></td>
<td>Development and operating costs</td>
<td>$10,000.00</td>
</tr>
<tr>
<td></td>
<td>Student Assistant to support development and implementation</td>
<td>$19,600.00</td>
</tr>
</tbody>
</table>

Report from the Presidential Task Force on Alcohol and Substance Misuse
<table>
<thead>
<tr>
<th>Keg Regulation Program</th>
<th>Marketing</th>
<th>$2,500.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluation</td>
<td></td>
<td>$19,600.00</td>
</tr>
<tr>
<td>Incentives for students to participate in evaluation</td>
<td></td>
<td>$2,500.00</td>
</tr>
<tr>
<td>Additional Staff Support of Current and Additional Initiatives</td>
<td>Current Health Educator with a focus on AOD will be able to assist in this capacity</td>
<td>$0.00</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>$529,300.00</td>
</tr>
</tbody>
</table>