

The logo for ssdp (Student Support and Development Programme) is located in the top right corner. It consists of the lowercase letters 'ssdp' in a teal, sans-serif font. The first 's' is partially enclosed by a teal square.The logo for neurosight is centered in the upper half of the slide. It features the word 'neuro' in a light blue, lowercase, sans-serif font, followed by a stylized brain icon composed of a grid of lines, and then the word 'sight' in the same font and color.

# **Student Mental Health and Drug Use**

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How to approach the  
situation?

# Session Overview

**6.00pm** - Introduction - Paul North and Arda Ozcubukcu, NeuroSight

**6.10pm** - What's the situation? - Arda Ozcubukcu, NeuroSight

**6.45pm** - How to design tools and interventions that are relevant to students' needs and worries? - Arda Ozcubukcu, NeuroSight

**7.00pm** - What do students think of the support available at their university? - Eleri Crossland, SSDP

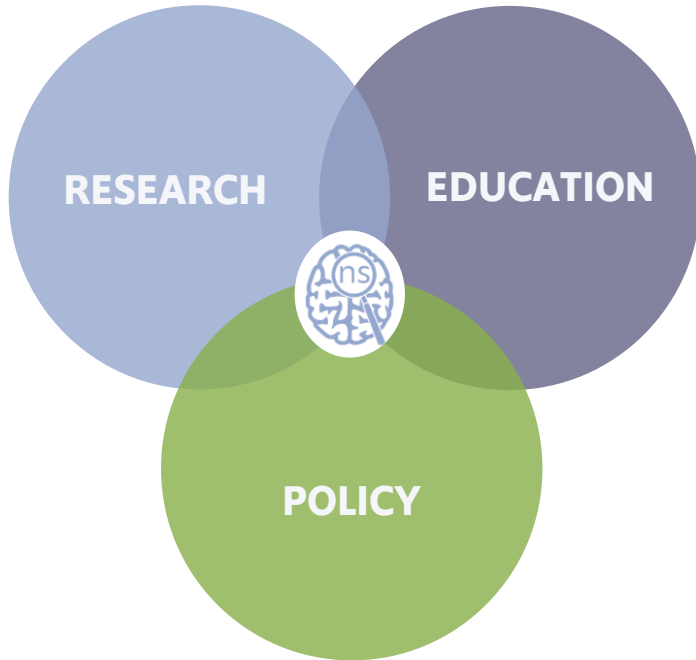
**7.05pm** - Engaging students through SSDP - Eleri Crossland SSDP

**7.15pm** - Q+A

**7.30pm** - Close

Questions or comments please feel free to use the chat

# Who are we?



neuro**ns**ight

We improve the policies and processes organisations have in place, deliver bespoke educational interventions and conduct research to reduce economic, psychological and physical harm due to drug use.

Partner organisation to [www.drugsand.me](http://www.drugsand.me)

drugs and  me

# Introductions

Today's speakers:



Paul North



Arda Ozcubukcu



Eleri Crossland

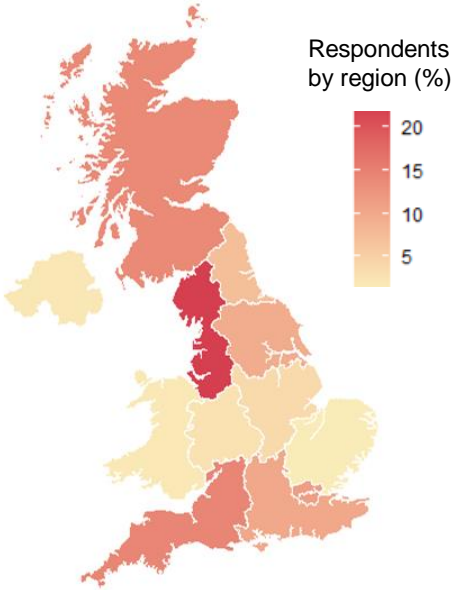
*- Huge thanks to Sabrina Bunbury for making the graphs! -*

# Survey

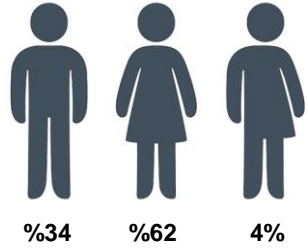
- Survey ran between 30/10/2020 and 13/12/2020  
→ National lockdown during November
- Content agreed in consultation with SSDP and Drug Science Student Society
- 38 questions + general demographic questions
- Offered Amazon vouchers to target all student
- Reached 1,360 students, of which 1,080 were university students



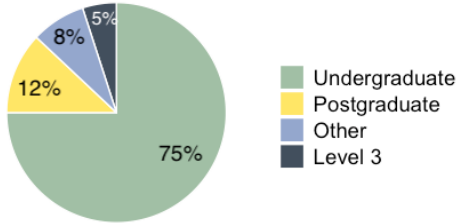
# Demographics



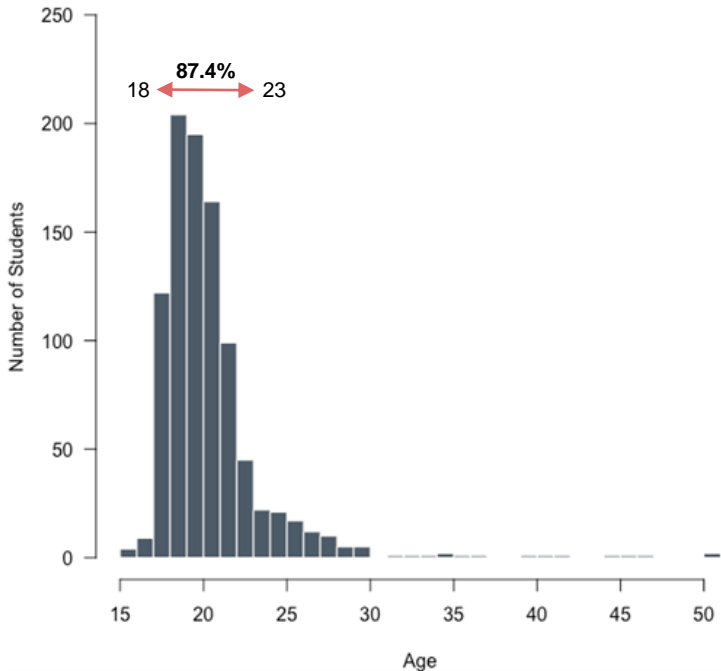
**N = 1,080**  
**732** complete responses by current students



Level of study of students in the sample



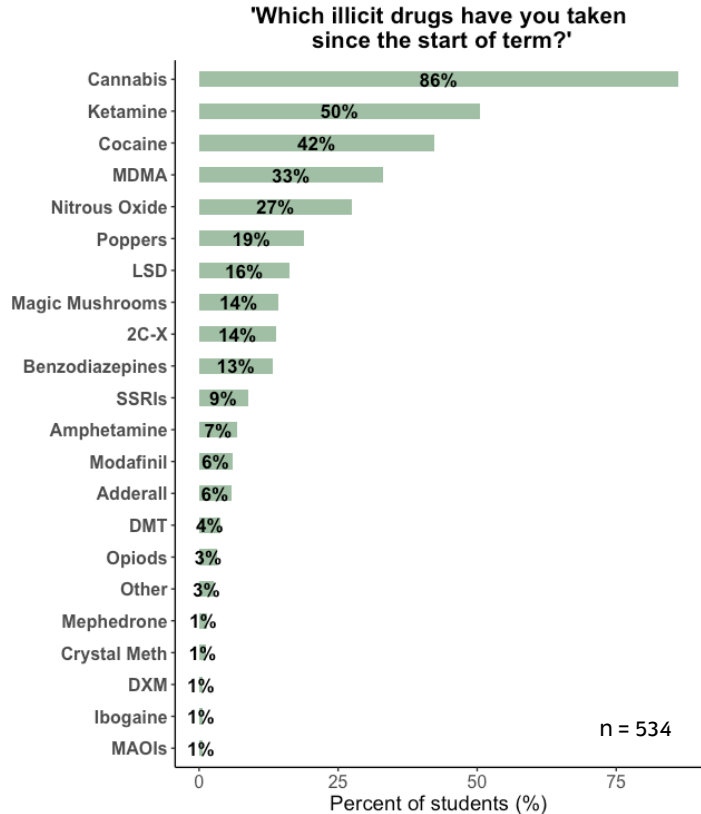
Histogram of age of students



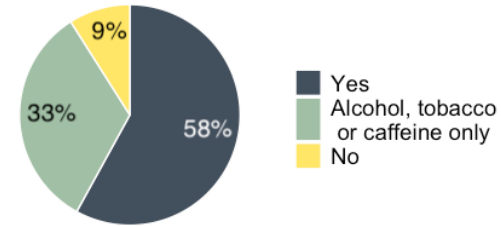


**What's the Situation?**

# Overview of Drug Use



**'Have you used any drugs recreationally since the start of term?'**



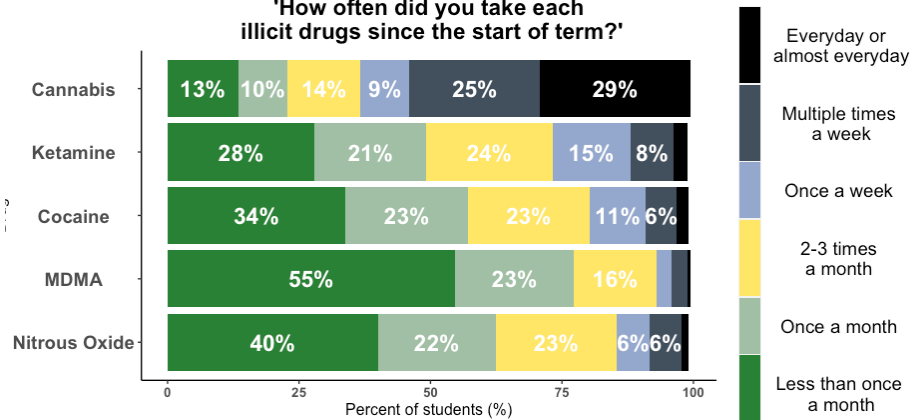
n = 949

- Drug use prevalence since the start of term was **58%** (consistent with Taking the Hit and our in-house research).
- The 5 most commonly used drugs were **cannabis, ketamine, cocaine, MDMA** and **NOS**.
- Comparison with the 1<sup>st</sup> lockdown:
  - Increased use of most drugs
  - Very consistent cannabis use
  - Greatest increase in party drugs, including poppers and NOS - freshers parties?



# Overview of Drug Use

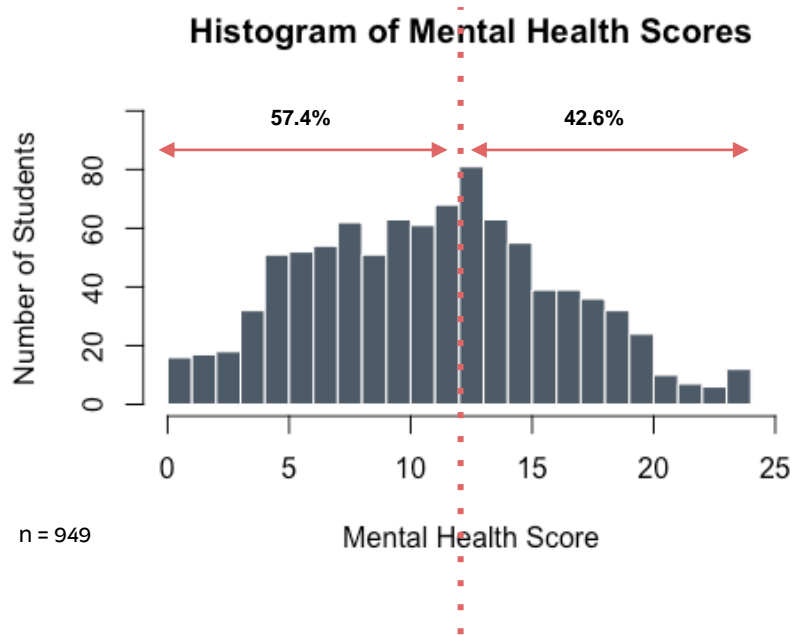
The top five most commonly used drugs:  
'How often did you take each  
illicit drugs since the start of term?'



n = 525

- Most frequently used drug was cannabis:
  - 29% used it **everyday or almost everyday**
  - 25% used it multiple times a week
- Least frequently used drug was MDMA.
- 27% of ketamine users used it once a week or more.
- 20% of cocaine users used it once a week or more.
- 15% of NOS users used it once a week or more

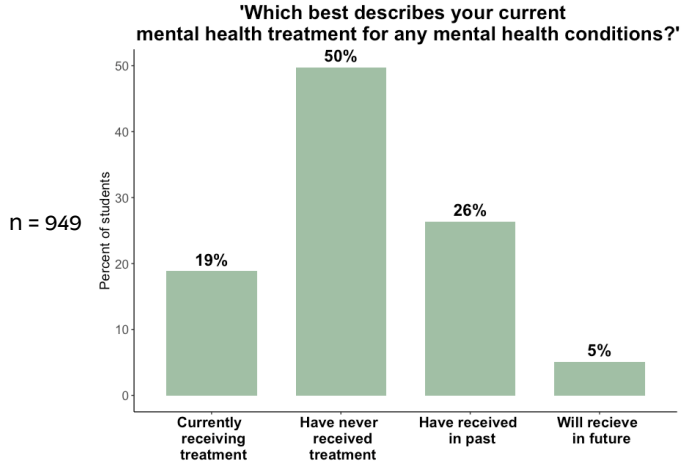
# Overview of Mental Health



Kessler Psychological Distress Scale (K6) was used for screening.

- A score of >12 is a strong indicator of the presence of a diagnosable mental illness with considerable disability.
- The **average score** was **11.4** (SD = 5.2, median = 11, mode 13)
  - Males' average = 10.2 (SD = 5.2)
  - Females' average = 11.9 (SD = 5.0)

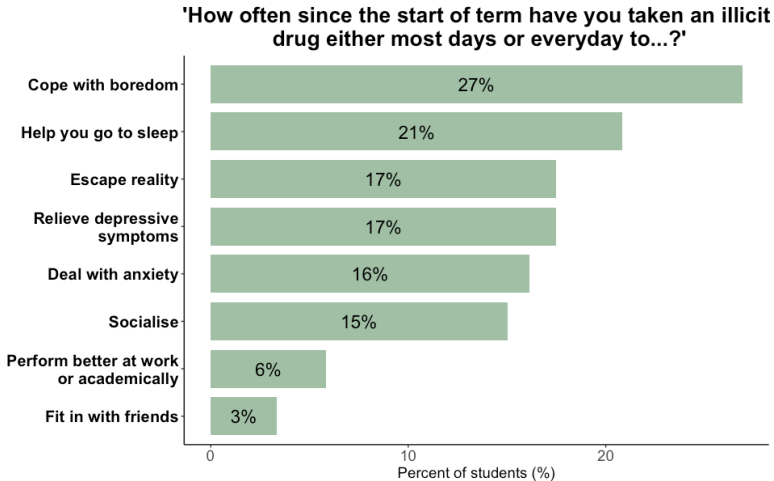
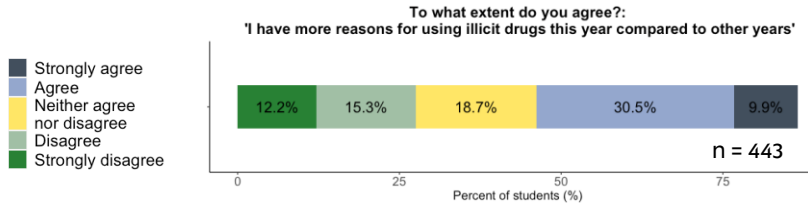
# Overview of Mental Health



Mental health score according to treatment			
Treatment	Mean	Median	N
Currently receiving treatment	13.58	14	179
Has never received treatment	9.86	10	472
Has received treatment in the past	12.19	12	250
Will receive treatment in future	14.25	14	48

- **24%** currently receive or will receive mental health treatment
  - This number is much less than the percentage of high scoring students (42.6%) → unmet needs?
- **Half** of students have never received or won't receive treatment
- Students mental health scores reflect their treatment status nicely:
  - Students who will be receiving treatment had the worst score on average
  - Students who hadn't or won't receive treatment had the lowest mental health score on average
- The scores of students who received treatment in the past were still higher than students who didn't need treatment.
  - How effective is treatment?

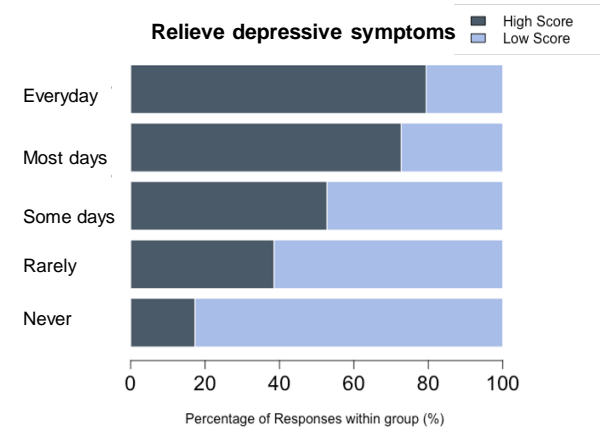
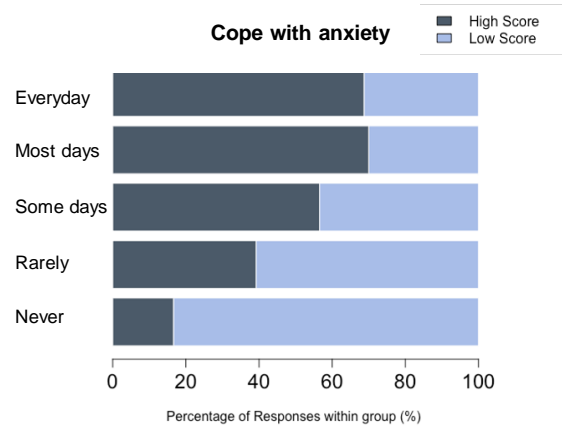
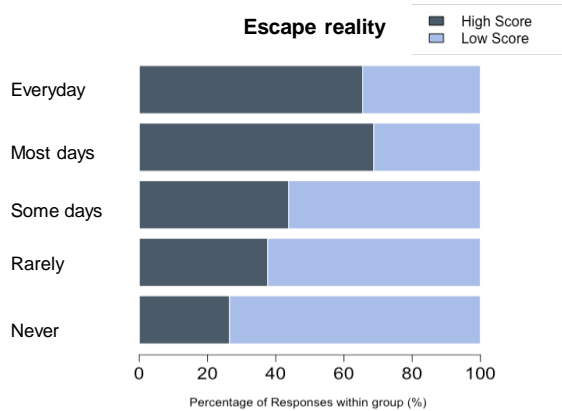
# Mental Health



- **40.5%** of students thought that they “have more reasons for using illicit drugs this year compared to other years”.
- Most common reasons for regular drug use were to “**cope with boredom**” and “**go to sleep**”.
- Peer pressure didn’t seem to be relevant to regular drug use.

# Mental Health

How often since the start of term have you taken an illicit drug to....?

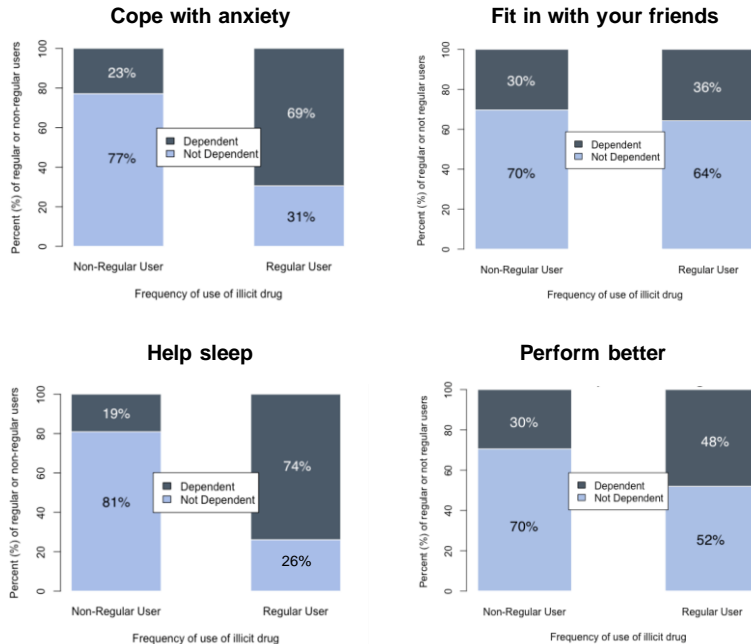


- A closer look at mental health-related reasons showed a clear relationship between the regularity of drug use and the state of mental health.
  - Students with high psychological distress use illicit drugs more regularly to cope with their mental health
  - Conscious or subconscious self-medication?

# Mental Health

## Regular and non-regular users: 'How often do you use illicit drugs to...?'

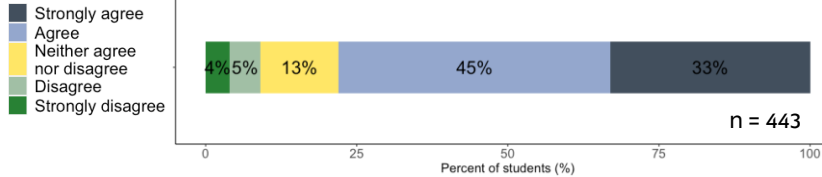
(Stacked by whether dependent or not dependent on a drug)



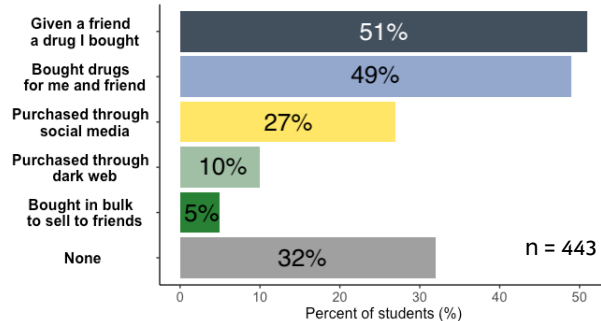
- Students who use drugs regularly are more likely to feel dependent on a drug.
  - Statistically significant difference for all reasons of use.
- Feelings of dependency is more common among regular users if the reason of use is related to mental health.

# Access to Drugs

To what extent do you agree?:  
'I find it easy to obtain drugs'



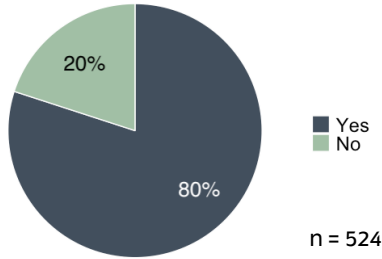
'Which of the following have you done since the start of term?  
Tick all that apply'



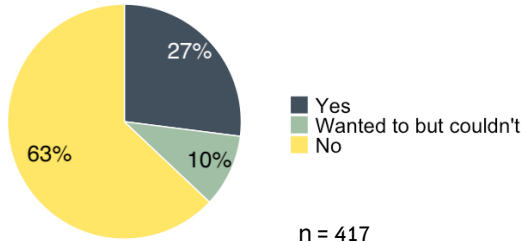
- **78%** of students who use drugs found it easy to obtain illicit drugs - despite the lockdown!
- **Half** of students who use drugs were involved in social dealing.
- **5%** of students who use drugs bought illicit drugs in bulk in order to supply their friends
  - Implications for policies?
- A significant proportion purchased their drugs online:
  - **27%** through social media
  - **10%** through dark web

# How Do Students Start Taking Drugs?

'Did you try or use any illicit drugs prior to your enrolment at your university?'



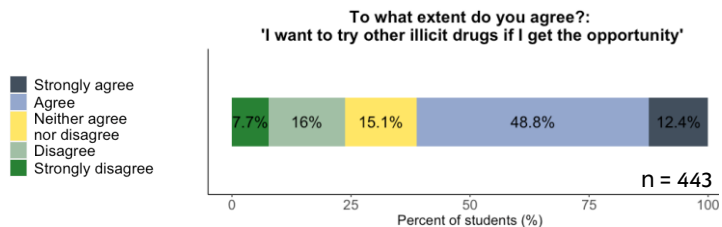
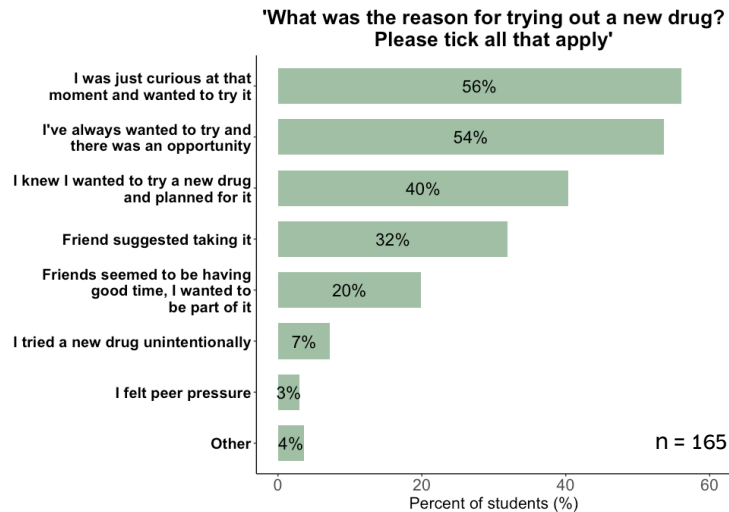
For students that have used drugs prior to enrolment at university:  
'Have you tried any new drugs since the start of term?'



- **80%** of students who use drugs started using drugs **before university**.
  - Implications for abstinence-based policies?
- Of the students who tried illicit drugs prior to university:
  - **27%** tried a new drug
  - **10%** wanted to but couldn't

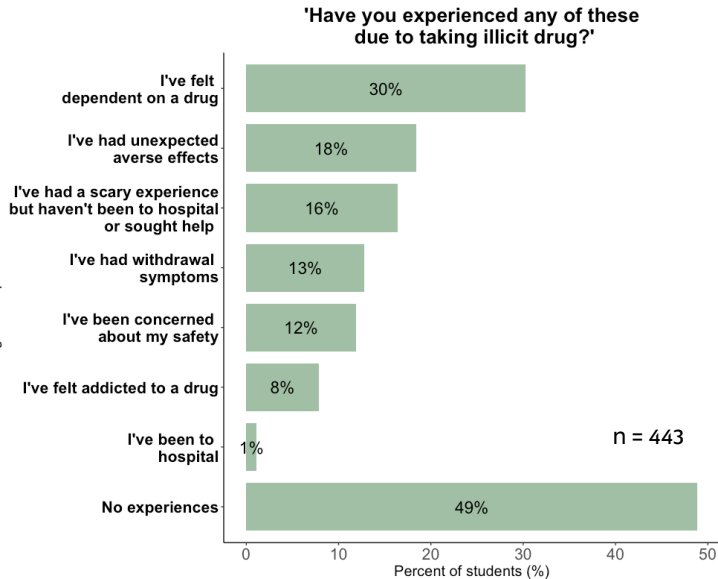


# Why Do Students Start Taking Drugs?



- Of the students who tried a new drug since the start of term:
  - **56%** tried it out of curiosity
  - **40%** actively planned for it
  - Only **3%** felt peer pressure
  - Implications for providing harm reduction advice?
- **61.2%** of students who use drugs wanted to try other illicit drugs if they had the opportunity.

# 1 in 2 Students Had a “Negative” Experience



- Only about **half** of students who use drugs hadn't had a negative experience
  - **30%** felt dependent
  - **13%** felt withdrawal symptoms
  - **8%** felt addicted
  - **16%** had a scary experience but didn't ask for help!
  - **12%** was concerned for their safety
  - Only **1%** had been to hospital

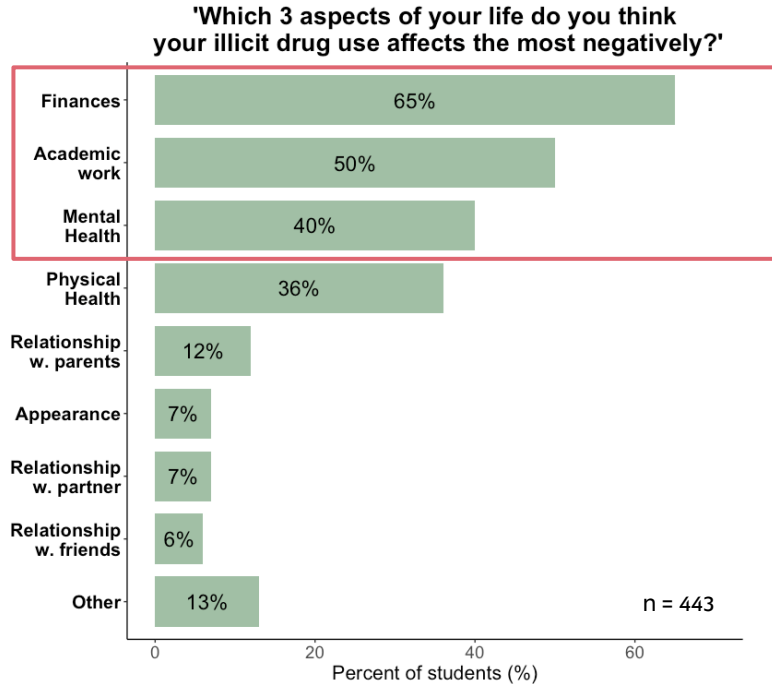
**Dependence:** being reliant on a drug to feel in a certain way, and it's not the same as addiction

**Addiction:** compulsive drug taking despite negative consequences



# How to Design Tools and Interventions That Are Relevant to Students' Needs and Worries?

# Relevance

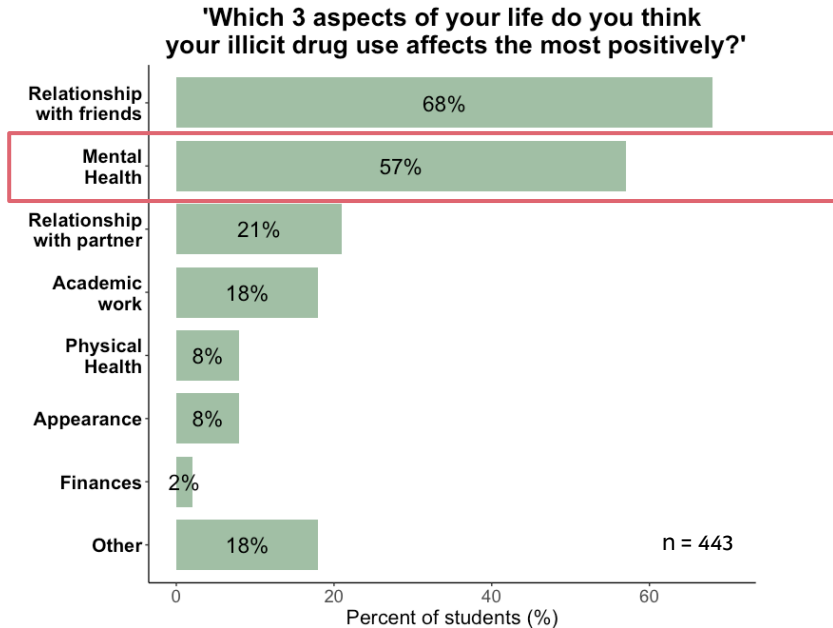


While talking about the negative effects of drugs to discourage drug use, messaging should focus on **finances**, **academic work** and **mental health**.

Examples:

- Workshops activity - Make students think about something they wanted to buy, make them calculate how many g of cannabis/cocaine they need to cut down to save money.
- Share information on social media about how drugs affect executive functions and how this is relevant to academic performance.
- Integrate drug-related information into mental health resources.

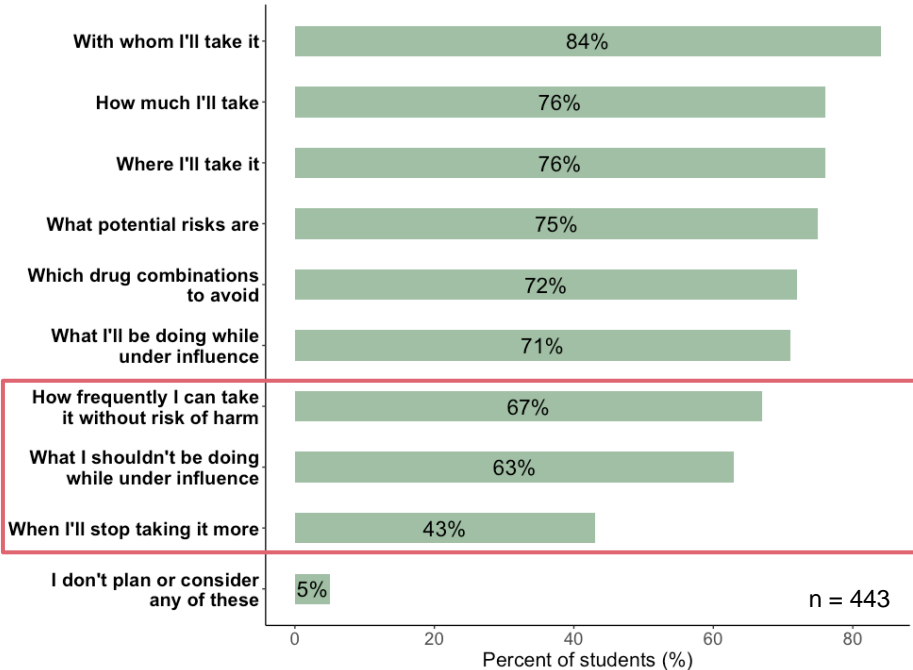
# Relevance



- “Mental health” is in top 3 in both graphs.
  - Illicit drug use both makes and breaks mental health.
  - Easiest path for drug use to become problematic
- Educate students on:
  - Implications of drug use for their mental health
  - Signs to look for to spot problematic drug use
- Social aspects of drug use can’t be ignored.
  - To successfully promote behaviour change, an alternative behaviour should be provided to substitute the undesired behaviour.

# Which Harm Reduction Advice Is Most Needed?

'Do you plan or consider any of these before taking an illicit drug? Please tick all that apply'



Most drug harms comes from the way drugs are used.

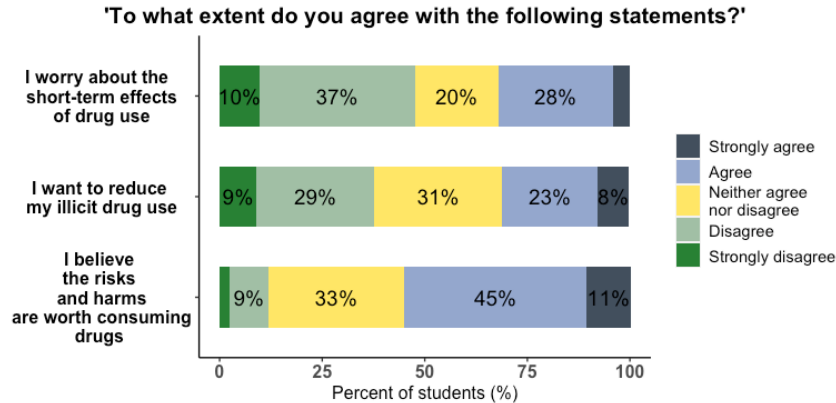
Drugs: positive feedback mechanisms; reinforce behaviour

→ Introduce negative feedback mechanisms; thinking processes

Examples:

- Ketamine (powder) - sickness, confusion (internal feelings)
- MDMA (pill) - wait 2h
- Don't accept challenges
- Sick of comedowns? - 3 months rule

# Scaremongering?

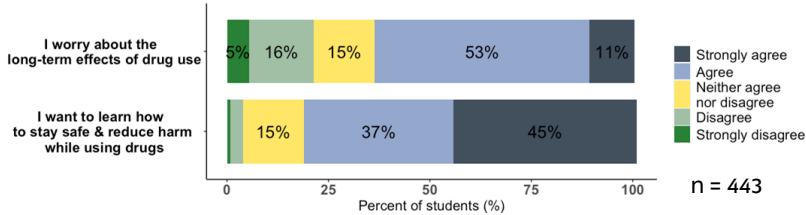


n = 443

- Majority of students (56%) who use drugs already made their judgment about if it's worth the risks through first-hand experience.
  - Can you change their minds?
- Only 33% worry about the short-term effects of drug use.
- Only 31% want to reduce their drug use.

# What to Do Then?

'To what extent do you agree with the following statements?'

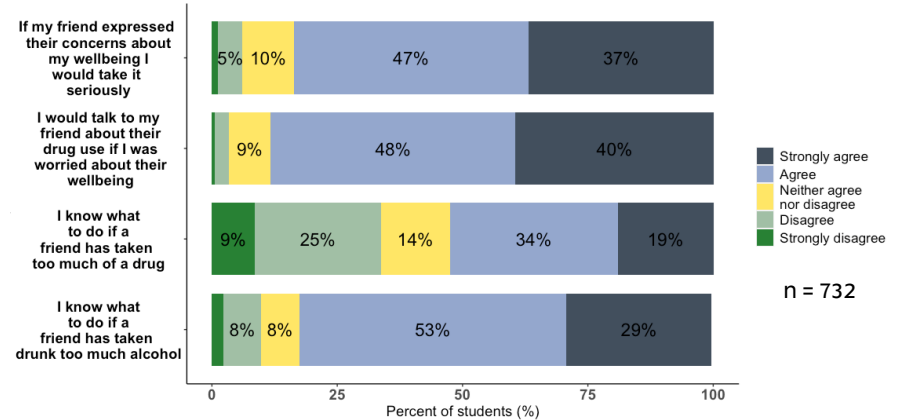


- 64% of students who use drugs worry about drugs' long-term effects
- 82% want to learn about drugs

→ Even though young people are risk-takers, they don't want to be harmed. There is demand for information!

? Inform all students or the ones using drugs ?

'To what extent do you agree with the following statements?'



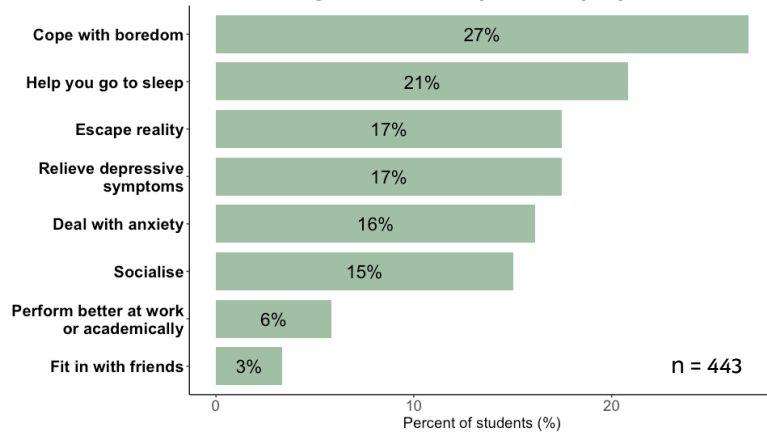
- Knowing what to do when a friend takes too much can make the difference between life and death!
- Encourage **peer support**
  - 88% would talk to friends about their wellbeing
  - 84% would take their friend's concerns seriously

→ Can train interested students to provide support confidentially to prevent fear of punishment

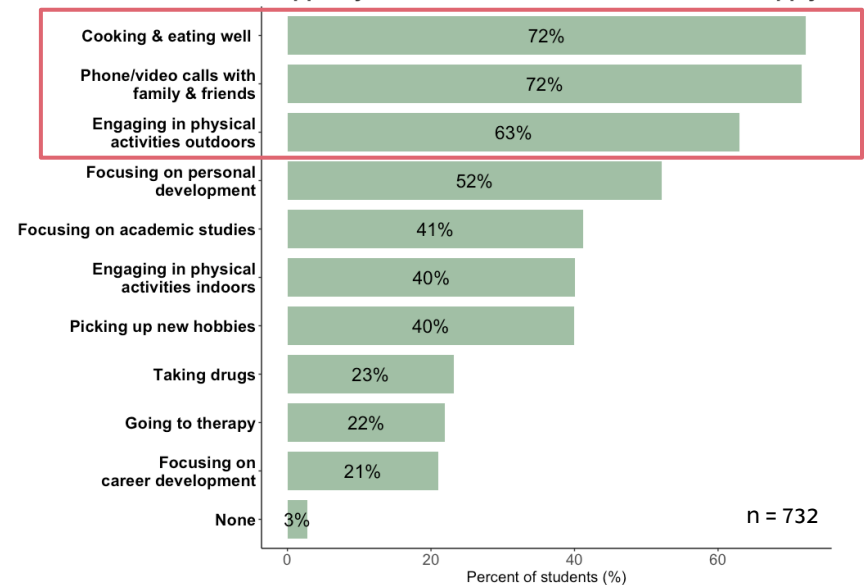


# What to Do Then?

'How often since the start of term have you taken an illicit drug either most days or everyday to...?'



'Which of the following did you find most useful to support your mental health? Please tick all that apply.'



## Offer:

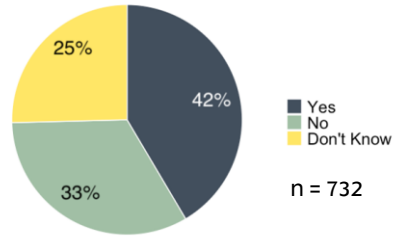
- Entertaining and engaging events
  - Online cooking events by students
  - Daily walking groups (based on restrictions)
- Support/resources on sleep



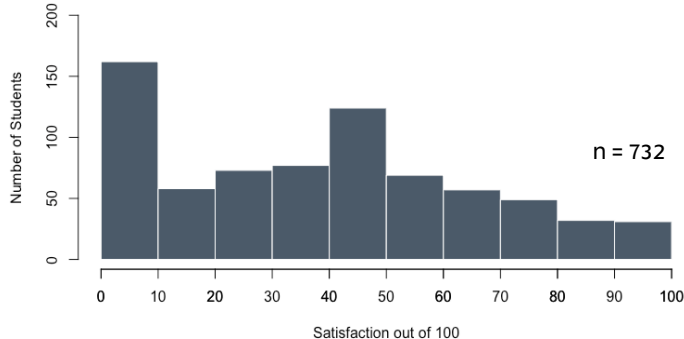
# What Do Students Think of the Support Available at Their University?

# Wellbeing Support and Advice

'Has your university provided you additional wellbeing support and advice regarding the potential effects of COVID-19 on your mental health'



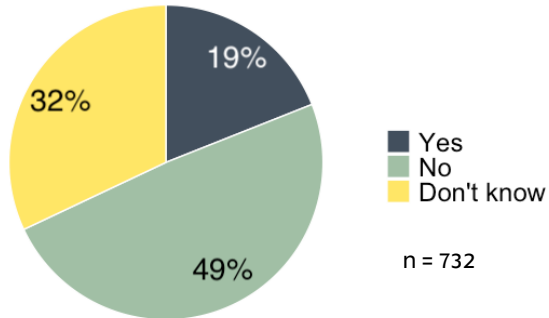
'On a scale of one to 1-100, how satisfied are you with the mental health support your university provided since the start of term?'



- Only **42%** received or were aware of additional wellbeing support
- Students gave an average of 40.1 points for their satisfaction with available support

# Information on Drugs

Has your university provided you safety information concerning illicit drugs?'



- Only **19%** reported having received safety information concerning illicit drugs

# ENGAGING STUDENTS THROUGH SSDP

PRESENTED BY ELERI  
CROSSLAND

CO-CHAIR OF SSDP UK  
UNIVERSITY DRUG POLICY  
COMMITTEE

SSDP DURHAM PRESIDENT



# AN INTRODUCTION TO STUDENTS FOR SENSIBLE DRUG POLICY



## ORGANISATION

Individual "chapters" of SSDP operate on a grassroots basis in universities and communities all over the world.

## MISSION

We believe that "The War on Drugs" is failing our society. Instead we advocate a harm reduction-based approach to drug policy and education to counteract the impact of drug misuse upon our communities.

## VALUES

SSDP is an inclusive, anti-racist organisation that neither condemns nor condones the use of any legal or illegal drugs - we respect the right of individuals to make decisions about their own health and wellbeing.

# CHANGING DRUG POLICY IN LIGHT OF THE PANDEMIC THROUGH SSDP UK



## INTERNATIONAL CAMPAIGNS

- #SupportDon'tPunish
- International Overdose Awareness Day

## UNIVERSITY DRUG POLICY REVIEW

- NUS Drug and Alcohol Impact
- Testing Kits

## WORKING WITH PARTNER ORGANISATIONS

- NeuroSight
- Volteface
- DMS Foundation
- Bristol Drug Project
- Labour Drug Policy Reform Group
- Conservative Drug Policy Reform Group

# ENGAGING WITH STUDENTS THROUGH SSDP UK



Students for Sensible Drug Policy UK was live.  
31 August 2020 · 🌐

## CO-ORDINATING EVENTS, ACTION AND TRAINING WITH PARTNERS

- Survey with NeuroSight
- Drug Policy Activist Training with Transform and LEAP UK

## SOCIAL MEDIA ENGAGEMENTS

- Distributing Harm Reduction Information
- Crossover events between chapters

## CO-ORDINATING CHAPTERS

- Regular meetings
- Shared actions and initiatives
- Supporting new chapters

03



# WORK OF INDIVIDUAL CHAPTERS



## NEW SSDP CHAPTERS RATIFIED

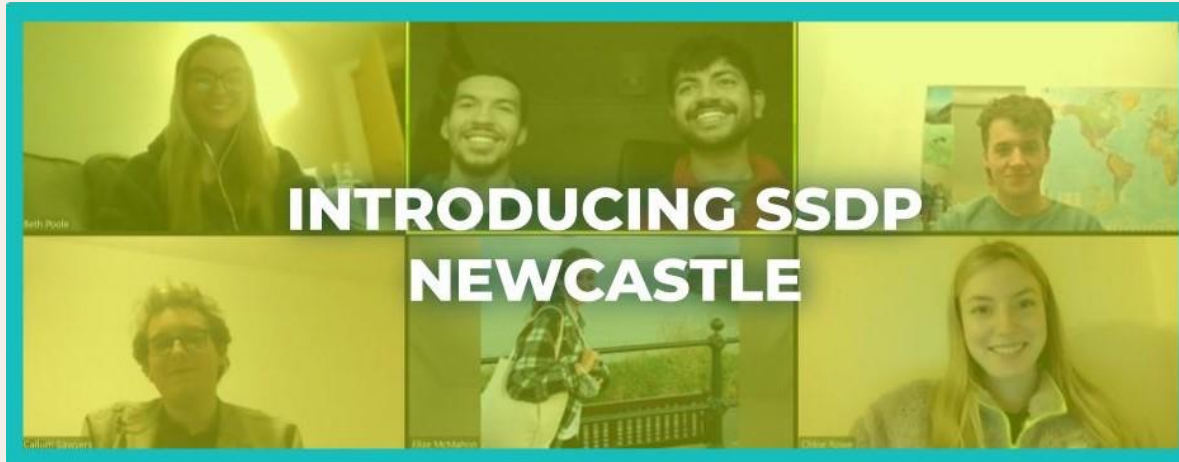
- King's College London
- Newcastle
- Surrey
- Huddersfield
- Queen Mary
- Bristol

## INTERNAL ACTIONS

- Harm reduction leafletting in local bars and university drug policy review by SSDP Durham

## EXTERNAL ACTIONS

- Online events with guest speakers, such as 'Navigating Career Opportunities in Psychedelics', hosted by SSDP UCL



RECEIVE OFFICIAL  
UNIVERSITY  
RECOGNITION

HOLD REGULAR  
MEETINGS

ATTEND NATIONAL  
AND REGIONAL  
SSDP EVENTS

# SETTING UP AN SSDP CHAPTER

# PERSONAL BENEFITS

## LEARNING AND RESPONSIBILITY

- Life-saving harm reduction information
- New interests

## SOCIAL

- Meet caring, like-minded people
- Engage with students nationwide

## EMPLOYMENT AND CREATIVE OPPORTUNITIES

- Journalism
- Psychedelic Career Pipeline Scheme

## ● BOARD MEMBER ELECTIONS

- Nominations close Monday 15th February
- Join SSDP UK Network on Facebook to find out more

## ● SUPPORTING NEW CHAPTERS

- Contact me or SSDP social media for more information on setting up a chapter

## ● UPCOMING EVENTS AND TRAINING

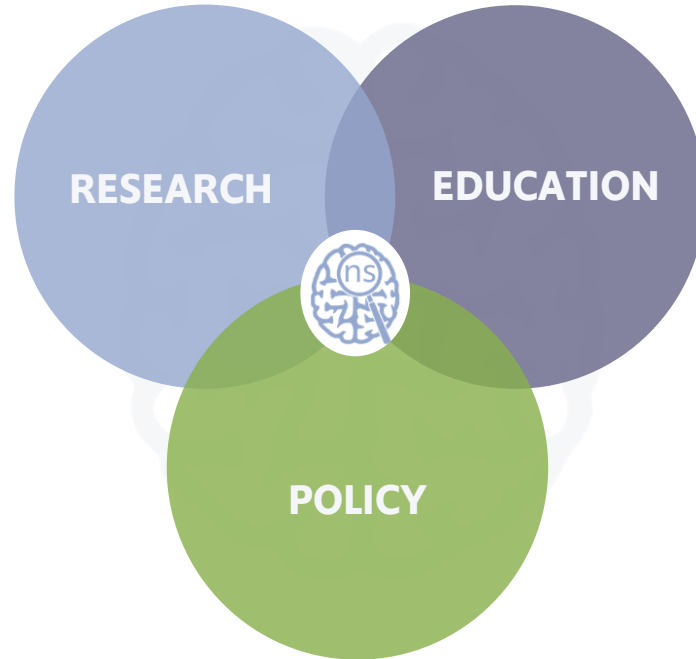
- Harm Reduction Workshops with DSM Foundation, Drugs & Me, and The Alcohol Education Trust

## ● SOCIAL MEDIA

- Sharing information, events and creative content on regular platforms

What's next for SSDP UK?

# neurosight



- Surveys
- Reports
- Interviews

- Talks
- Workshops
- Training
- Campaigns

- Policy analysis
- Bespoke Policy
- Intervention programme

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Website – [www.neurosight.co](http://www.neurosight.co)  
Twitter - @NeurosightDrugs



# Q & A

[info@neurosight.co](mailto:info@neurosight.co)