

MINUTES  
STATE UNIVERSITY SYSTEM OF FLORIDA  
BOARD OF GOVERNORS  
DRUGS, ALCOHOL & MENTAL HEALTH TASK FORCE  
UNIVERSITY OF CENTRAL FLORIDA  
ORLANDO, FLORIDA 32816  
JUNE 27, 2018

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and its Committees are accessible at <http://www.flbog.edu>.*

1. Call to Order and Opening Remarks

Chair Valverde convened the meeting on June 27, 2018, at 3:39 p.m. with the following members present: Governors Valverde, Kitson, Tripp, and White; Florida Agricultural and Mechanical University Trustee Lawson; Florida Atlantic University Trustee Barbar; Florida State University Trustee Burr; University of Florida Trustee Heavener; Florida Polytechnic University Trustee Martin; New College of Florida Trustee Schulaner; and University of South Florida Trustee Watkins. A quorum was established.

Chair Valverde stated that the Task Force met for the first time in March and resulting from that meeting he invited Dr. Corey King and Dr. Larry Lunsford to assist in developing a dashboard framework for the Task Force. Chair Valverde reminded the Task Force that its work is a work in progress, with much of the work being done outside of its regularly held meetings. Chair Valverde welcomed and introduced Governor Jalisa White, the Board's new student member from Florida Gulf Coast University (FGCU), and Ms. Nancy Watkins, Trustee from the University of South Florida (USF).

2. Minutes of Task Force Workshop

Chair Valverde asked for a motion to approve the minutes from the March 27, 2018 Task Force workshop. Governor Tripp moved to approve the minutes, Governor Kitson seconded the motion, and the motion carried unanimously.

3. Draft Task Force Two-Year Work Plan

Chair Valverde introduced Dr. Christy England, Associate Vice Chancellor for Academic Research and Policy, and invited her to provide an overview of the two-year work plan for the Task Force, which begins with drug and alcohol issues and subsequently moves into mental health issues. Further, he stated that there are many student affairs staff in the SUS providing input and valuable information in this

process, and the goal is to glean best practices from all of the SUS institutions which will lead to system-wide accepted SUS best practices.

Dr. England thanked Chair Valverde and the Task Force, and noted that she will provide a brief overview of the proposed work plan on the issue of drugs, alcohol, and mental health issues, and include information about the scope, nature, landscape and magnitude of the critical issues and problem areas. For each of the three areas the Task Force will review tools and best practices for addressing these issues. Following the review of best practices, the Task Force will review the provided information and discern the most critical issues facing our students and institutions. Ultimately, the Task Force will identify appropriate system-level actions and initiatives that may need to be implemented, and determine the resources necessary for implementation.

In year one of the work plan, an overview of drug use was provided in March 2018, and in today's meeting there will be an overview of alcohol use among students; the drug and alcohol toolkit part 1, which includes laws and policies surrounding these issues; and the dashboard framework will be introduced. The work plan continues with part two of the drug and alcohol toolkit in September 2018 and will include a discussion of education, prevention, continuum of care and treatment. In November 2018 an overview of mental health will be provided, along with an update of system-wide mental health issues and services during the past two years since the issue of mental health was initially broached with the Board. Additionally, in November, a draft of the dashboard will be presented.

In year two of the work plan, beginning in January 2019, the Task Force will focus on best practices and toolkit tools for addressing mental health issues on campus, and will include discussions of education, prevention, treatment and continuum of care. In March 2019 there will be a retrospective discussion of drugs, alcohol and mental health, to ascertain critical issues and appropriate solutions. Further, the dashboard will be finalized. In June 2019 the Task Force will discuss resources needed for implementation of best practices and appropriate solutions chosen by the Task Force. A review of the previous two years of work and accomplishments of the Task Force will occur in November 2019.

Chair Valverde thanked Dr. England for her presentation of the two-year work plan and asked if there were questions. Governor Tripp expressed concern that the topic of mental health is a critical issue and should be addressed sooner in the two-year work plan and occurs simultaneously with drugs and alcohol issues. Chair Valverde clarified that the mental health topic actually begins in November 2018 and continues through 2019, noting that in the current meeting there is a presentation by Dr. Kathryn Kominars who is an expert in substance abuse and mental health. Further, Chair Valverde noted that Governor Tripp's concerns were valid and while there are time constraints to effectively address all of the issues, he was not opposed to beginning mental health

discussions in September 2018. Chancellor Criser added that the structure of the discussions in the work plan is not to imply an order of importance of the issues, rather it is a means of organizing the conversations. Further, Chancellor Criser noted that the SUS institutions have been working on mental health issues for approximately two years and allowing additional time within the two-year work plan for mental health will allow progress made by the institutions in services they provide and associated mental health data, to be provided. Having no further questions or comments, Chair Valverde thanked Dr. England for her presentation.

#### 4. Alcohol Use and Abuse Among College Students

Chair Valverde introduced Dr. Kathryn Kominars, interim Director of Counseling and Psychological Services at Florida International University (FIU), who is an expert in substance abuse and mental health issues to provide a presentation, and invited her to the podium.

Dr. Kominars expressed her delight in addressing the Board in this most important topic and noted that she would be happy to answer questions. She stated that the goal of her presentation was to give an overview of alcohol use among college students in the State University System (SUS), to provide information about factors that may influence the use of alcohol on campus, and to discuss some of the consequences and impacts of alcohol use.

Dr. Kominars communicated that often students perceive that other students drink alcohol to a greater degree than they actually do as shown by the data, and students' misconceptions can drive their own drinking behavior. Additionally, she provided a comparison of SUS students' alcohol consumption to a national sample, and noted that not everybody is drinking all of the time. The data revealed that 96% of college students drank alcohol at some point, whether only once, occasionally, or more often, and that 57% of all 18-25 year olds drank alcohol at some point, whether only once, occasionally, or more often. The difference between the 57% and 96% is that there are many 18-25 year olds who do not go to college and do not drink alcohol. The data provided by Dr. Kominars also showed that binge drinking occurs among SUS college students and in the nation as a whole, and that there is an association between drinking alcohol and the college experience.

Dr. Kominars reported that prevalent factors and influences of alcohol use among college students include having a previous history of alcohol use in middle/high school; experiencing peer pressure; using escape and avoidance behaviors such as coping mechanisms; having a family history of alcohol dependence; the college culture itself, which includes membership in student organizations; experiencing mental health issues; and the availability and low cost of alcohol.

Chair Valverde inquired whether the most prevalent mental health disorder among college students is anxiety and depression, or psychiatric diagnoses, such as schizophrenia and personality disorders, and whether it drives alcohol use. Dr. Kominars reported there are many anxious and depressed people who use alcohol and separating out mental health issues from alcohol use is challenging as they often overlap. Among college students who seek counseling services on campus, anxiety followed by depression are the primary reasons they seek counseling, followed by relationship problems, academic stress, and further down the list is substance abuse issues. Chair Valverde also asked what percentage of students with drinking issues, also have anxiety and depression issues, and he stated with regard to Governor Tripp's sentiments of addressing mental health problems, whether the data would show that 80% of mental health issues would be classified as anxiety and depression. Dr. Kominars reported that the current data shows that 40% of students who seek services do so for anxiety and approximately 30% to 35% seek help for depression.

Additionally, Dr. Kominars reported that factors which decrease the use of alcohol by students are students' expressed parental expectations for them related to alcohol consumption, which includes explicit consequences, and student engagement in campus and community activities, including religious or spiritual engagement. Additionally, providing health education to students that specifically addresses their perceptions about alcohol use among their peers increases the likelihood they will abstain from alcohol use.

Dr. Kominars noted that short- and long-term consequences of alcohol use include examples such as diminished academic success and lower GPA's, increased impulsive behaviors, driving under the influence, sexual violence, increased risky sexual behaviors, relationship problems, legal problems, diminished physical health, increased treatment needs, and sometimes death. Dr. Kominars provided data that shows 1% of college students in the SUS and nationally were treated for drug and alcohol use within the previous twelve months, and 3% of SUS students and all college students reported that alcohol use interfered with their academic performance within the last 12 months.

In summary, Dr. Kominars reiterated that most of the SUS students (96%) (identical to all college students) reported having used alcohol at least once within the last 30 day period, which is higher than all 18-25 year olds nationwide, who reported having used alcohol in the same time period. Additionally, 3% of SUS and all college students who reported using alcohol also reported academic impact, and 1% were diagnosed and treated for substance (alcohol and drug) abuse.

Governor White asked how students who need assistance with alcohol issues but do not recognize their need may be helped. Dr. Kominars stated that this concern will become part of the best practices discussion. Further, Dr. Corey King, chair of the Council for Student Affairs, added that the SUS institutions practice the "See Something, Say

Something” protocol, which is an early intervention model that incorporates student and community efforts. Governor Tripp asked what the data shows historically regarding alcohol consumption, and whether alcohol consumption is increasing, decreasing or remaining constant. Dr. Kirk Dougher, Assistant Vice President of Health and Wellness at Florida Atlantic University (FAU), addressed Governor Tripp’s question stating that during the last seven to ten years there has been a slight decline in the number of students coming into campus counseling centers and campus health services offices for alcohol and drug abuse issues, with the exception of students seeking services for marijuana use, which has increased. Chair Valverde asked Dr. Kominars what is one of the critical issues to learn about alcohol use among our college students, to which Dr. Kominars stated that it is important to note that alcohol use is a societal issue to which not only college students are subjected, however, the issue is particularly challenging for students as alcohol consumption seems to be socially intrinsic to the college experience. Further, as students are away from home they often lack family support in close proximity, which heightens their alcohol consumption. Governor Tripp noted that while there has been a decline in students seeking counseling for drug and alcohol issues, mental health issues have increased, to which Dr. Kominars concurred with his assessment. Dr. Kominars noted that the American Psychological Association documents that in the U.S. people across the board are reporting higher degrees of stress than in previous years, and that alcohol abuse overlaps with mental health issues and can lead to mental health issues. Governor Patel inquired whether the Task Force should consider promoting responsible drinking, adding that the data show that most college student drinkers are responsible. In response Dr. Corey King stated that Chair Valverde asked the Council of Student Affairs to develop a framework for the focus of the Task Force, which will be presented later. Having no additional questions or comments, Chair Valverde thanked Dr. Kominars for her presentation.

##### 5. Drugs and Alcohol Tools in the Toolkit Part 1: Laws and Policies

Chair Valverde introduced Dr. Michael Rollo, Vice President of Student Affairs, Florida Gulf Coast University (FGCU), and welcomed him to the podium to give a presentation about the laws and policies governing substance abuse. Dr. Rollo reported that his presentation is the first in a two-part series, and that he will provide information about an array of federal and state laws, and local ordinances that guide and direct institutions in dealing with alcohol use among students.

Dr. Rollo noted that the Higher Education Act (HEA) is a federal law that mandates our institutions to annually establish and communicate rules and standards of conduct for students, faculty, and staff, and includes the areas of drug and alcohol possession, use

and distribution, as well as the consequences, legal ramifications, and health risks for violation of the rules. The HEA requires a description of all institutions' counseling and treatment programs and a biennial review of these programs. The Controlled Substance Act is a federal law that classifies drugs into legal and illegal categories. State laws such as the Drug-Free Workplace Act; Drug Abuse, Possession and Control; and Florida Statutes, set the minimum age for drinking alcohol, criminalize drinking and driving, require SUS institutions to create drug-free work place environments, and create avenues for support and treatment for people who need assistance with alcohol and drug issues. The violation most prevalent on SUS institutions campuses is under-age drinking. Local ordinances related to alcohol deal with open container violations, and allow for communities to limit how visible alcohol is within a community. The state of Florida has the Good Samaritan Act which provides immunity from civil liability for individuals who provide medical assistance in good faith to those in need. The Florida Drug Overdose Immunity law provides for a person who over-doses on drugs, or a person who helps an overdosed person, in that they cannot be charged, prosecuted or penalized for possession of a controlled substance when the only evidence obtained for the offense is gotten as a result of the person seeking medical assistance. Additionally, Dr. Rollo reported that Florida is one of ten states without protective laws for under-aged people who drink and/or intoxicated people who seek medical help, which is problematic for students who know they are in violation of the law and because of it they may not seek assistance. SUS institutions' Codes of Conduct policies and disciplinary procedures are consistent with federal and state laws, and require sanctions for violation of laws and policies that occur both on and off campus. This applies to individual students, student organizations, and employees.

Dr. Rollo reported that in the last eight to ten years there has been a movement to implement medical amnesty to campus, which provides amnesty for violations of institutions' codes of conduct or other university policies (excluding federal and state laws) and makes it available for those who need medical assistance due to drug and alcohol use, and for those who seek help for others. The concern is that students are hesitant to seek help when someone is overly intoxicated or needs medical treatment. Most of the SUS institutions have developed policies whereby students who do seek help for those in need may receive less severe sanctions, however, students are still subject to state and federal laws. There is debate about the breadth of medical amnesty policies, and after a student uses it one time, subsequent situations are evaluated on a case-by-case basis.

Further, Dr. Rollo discussed the work of a 2009 Board of Governors Student Affairs and Campus Life Committee in collaboration with the Council for Student Affairs that focused on excessive alcohol use among students and the marketing efforts of local businesses targeted toward students. The Committee found that egregious drink specials in Florida's university communities contribute to excessive and high-risk alcohol consumption among students, and while regulating marketing practices is an

effective strategy to lessen alcohol consumption, the authority to regulate drink specials occurs at the state level. Additionally, the Committee recommended in January 2010 that the Board of Governors support state laws that prohibit unlimited all you can drink specials, and restrict advertisement of drink specials.

In summary, Dr. Rollo suggested for consideration that the Task Force look at the laws and policies to ameliorate alcohol problems on campus by revisiting the option of supporting a legislative call for medical amnesty, to consider improving upon the drug overdose immunity law to provide protection from arrest, and work to enable local ordinances to address drink specials and marketing targeted toward college students. Dr. Rollo noted Part Two of the Tools in the Toolkit at the September Board of Governors meeting will include information about alcohol prevention and education best practices.

Chair Lautenbach inquired about what prevented the laws discussed by Dr. Rollo from being passed, to which Governor Tripp stated that there was strong lobbyist push-back against the effort. Chair Valverde asked whether there is a difference in states with medical amnesty compared to states without it in addressing alcohol issues, and in states with medical amnesty if students are more willing to seek assistance. Dr. Rollo noted that a recent tragedy of excessive drinking that resulted in a student's death at Penn State occurred in a state with medical amnesty, where unfortunately medical help was not sought. He noted the need for education about alcohol awareness, and inculcating a shift of not drinking in the campus community culture. Chair Valverde asked if there are existing gaps in policies at the university level, to which Dr. Corey King reported that a system-wide amnesty policy is a direction the Task Force may consider. Chair Valverde asked what statutory issues associated with medical amnesty would first need to be solved.

Florida Polytechnic University Board of Trustees Chair Frank Martin inquired about the efforts and successes of the 2009-2010 Board of Governors Committee mentioned by Dr. Rollo, where university staff reached out to businesses and bar owners along major corridors asking them to scale back their drink special efforts. Dr. Maribeth Ehasz, Vice President Student Development and Enrollment Services, University of Central Florida (UCF), who served as the SUS Council for Student Affairs in 2009-2010, stated that reaching out to businesses and bar owners was very time intensive and not as fruitful as had been hoped, and that sanctions against the businesses found in violation of local codes and ordinances were lax. Chair Valverde inquired whether there is evidence that shows a reduced rate of alcohol issues in communities where bars closed earlier than in communities with a later closing time. Dr. Rollo said that business closure times may be a direction for the Task Force to consider, and he reminded the Task Force of the creativity of some students in gaining access to alcohol. Florida State University (FSU) Trustee Chair Mr. Ed Burr said that the two laws discussed thus far include limitation of drink specials and medical amnesty, and that FSU would be fully supportive of

working with the Board of Governors in efforts to pass medical amnesty laws. Chancellor Marshall Criser clarified the discussion regarding medical amnesty, stating that although Florida does not have medical amnesty, the SUS can establish policies toward what happens on its campuses, however, as college student drinking occurs off campus medical amnesty would need to extend beyond campus. Governor White thanked Dr. Rollo for his presentation and added that it would be worthwhile to look into state laws as he suggested, and the Florida Student Association is interested and willing to participate in that discussion. Chair Valverde thanked Dr. Rollo for his presentation.

## 6. Student Wellness Initiatives

Chair Valverde introduced Dr. Corey King, Vice President of the Division of Student Affairs and Enrollment Management, FAU, and Dr. Larry Lunsford, Vice President of Student Affairs, FIU, and thanked them for their willingness to accept his challenge of developing a framework for the Task Force and their time and dedication, and invited them to the podium.

Dr. King reported that in an effort to assist in moving the Task Force forward he and Dr. Lunsford developed a framework that incorporates goals in the areas of student wellness, drugs and alcohol, and mental health, and the goals will be included in the dashboard that is being developed. Two goals in the area of student wellness are the system-wide adoption of the American College Health Association's National College Health Assessment, and the implementation of Healthy Campus 2020 in all of the SUS institutions. These two initiatives are inherently updated, with the next Healthy Campus being Healthy Campus 2030. Dr. Lunsford reported that there is a need to identify data sources and develop assessment methods to provide measures of success in the SUS in the area of Drugs and Alcohol. With that he presented four goals in the area of Drugs and Alcohol, and provided guiding questions for the Task Force in moving forward with development of the dashboard. The drugs and alcohol goals are to rebrand the collegiate student experience around health and responsible choices, align policies with practice to support the desired student/campus culture, implement best practices focused on prevention and early intervention, and to support students with non-drinking/non-drug using lifestyle. Dr. King presented the mental health goals, which are to embed health in campus mission statements, policies, and procedures, generate thriving communities and a culture of well-being, create or re-orient campus services focused on proactive and responsive mental health well-being, and to develop and implement a comprehensive needs assessment for incoming freshmen students.

Chair Valverde asked if there were questions or comments regarding the Student Wellness Goals. Chair Lautenbach asked whether alcoholic beverages are sold on SUS campuses. Dr. Lunsford stated that it is sold on some, if not all of the campuses.



Governor Tripp expressed concern about the mental health component of the Task Force and asked about incorporating into the Student Wellness goals training for campus faculty and staff to become more aware and adept at recognizing students who may need mental health services. Dr. King reported that some of the institutions have software (Cognito) related to mental health training for campus communities, and he recommended a common approach across the SUS for implementation of the training software. Governor Tripp suggested that the Task Force do an in-depth review of the training software across the SUS and move in a positive direction of mandating all campus faculty and staff be required to complete the training as a condition of employment.

Chair Valverde thanked Drs. King and Lunsford for their time and efforts in developing the framework, as it is a vital component of the Task Force, and asked them to make the necessary changes to it based upon the discussion, and to work with the Council of Student Affairs to identify metrics for the dashboard.

Chair Lautenbach asked whether the Task Force should consider dry campuses in the SUS. Dr. Rollo stated that one of the problems is that drinking primarily occurs off campus, and implementing a dry campus policy may not solve the problem. Additionally, Dr. King said that the Florida Student Association and faculty need to participate in the discussions of mental health, drugs and alcohol regarding common practices to be considered for implementation across the SUS. Governor Patel added that as food service providers play a major role in universities, and in some instances food and beverage services may be contracted out because of liquor licensing laws, and he suggested including them in the discussion. Dr. Lunsford added that in previous discussions of dry campuses the issue of tailgating has arisen and he agreed with bringing students into the discussion. University of South Florida, Board Trustee Ms. Nancy Watkins, reported that alcohol is sold on campus at USF, however, alcohol sales are not fueling the alcohol problem among its students, as the window for alcohol sales is fairly limited to specified hours. Further, she noted that the problem is from convenience stores and for profit entities surrounding campuses that sell low cost alcohol to students.

Dr. King summarized the three immediate actions for the Task Force to consider: implementing medical amnesty policies, lobbying the Florida Legislature for medical amnesty laws at the state level, and implementing software training protocols for campus faculty and staff. Chair Valverde concurred with Dr. King's summary and added that the Task Force may consider a White Paper for the Florida Legislature to move the discussion forward. Chair Lautenbach reiterated the value of having medical amnesty on SUS campuses, however, as students are still subject to arrest and prosecution from law enforcement, the over-arching goal is for the Legislature to pass medical amnesty legislation. Chair Valverde suggested that while the challenge is

great, data, the framework and the dashboard will provide the education necessary to move the conversation forward with the Legislature.

7. Concluding Remarks and Adjournment

Having no further business, Chair Valverde adjourned the meeting at 4:40 p.m.

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Fernando Valverde, Chair

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Cathy Oakley, Ph.D.  
Assistant Director for Academic and Student Affairs