

College students are vulnerable to addiction: Can we do anything to help?

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Movies and television shows often portray college students as heavy partiers who use and abuse a variety of substances, including alcohol and other drugs. However, we know that stereotypes are not always consistent with reality. This BASIS editorial explores the important addiction-related risks that college students actually experience and considers the implications for those with an interest in the health of this population.

College is a time for many young people to explore their independence and discover their passions. While adjusting to living independently is healthy, the college years also can be fraught with challenges that can lead to unhealthy behaviors. For example, during college, students must deal with being away from the social controls of family, navigating a time of stressful developmental transition, and managing new kinds of peer pressure.

At risk for addiction

Research indicates that young people, especially college students, are one of the highest risk groups for engaging in and having problems associated with various expressions of addiction, including alcohol (Hingson, Zha, & Weitzman, 2009) and illicit drugs (Mohler-Kuo, Lee, & Wechsler, 2003). Gambling is a recent addition to this list of recognized risky behaviors in this population, and researchers have found that the college student population is more likely than the general population to experience gambling-related problems (Barnes, Welte, Hoffman, & Tidwell, 2010; Blinn-Pike, Lokken Worthy, & Jonkman, 2007).

At risk for mental health problems

In addition to higher rates of addictive behaviors, college students also evidence higher rates of mental health problems, including anxiety and depression

(American College Health Association, 2009; Eisenberg, Gollust, Golberstein, & Hefner, 2007). Researchers have confirmed an increase in college students with psychological problems in recent years (Kadison & DiGeronimo, 2004). One possible reason for this increase is the dramatic advance in psychotropic drug treatment during the past 30 years that has enabled more students with depression, anxiety, and other psychiatric disorders to attend college (Gallagher, 2004). Another possibility is that improved identification and assessment of psychiatric and addictive disorders have increased awareness of these problems (Emerson et al., 2009).

Co-morbidity

It also is important to note that co-morbidity (i.e., experiencing multiple psychiatric disorders) is prevalent with expressions of addiction both in the general population (Kessler et al., 2008; Petry, Stinson, & Grant, 2005) and in the college population (Martin, Usdan, Cremeens, & Vail-Smith, 2014). In other words, those individuals experiencing one expression of addiction or mental health disorder are at much higher risk for experiencing additional addictions and mental health issues. For instance, excessive gambling and gambling-related problems are highly correlated with other expressions of addictions and mental health disorders in the college student population, including driving under the influence, binge drinking, alcohol problems, illicit drug use, and depression (Engwall, Hunter, & Steinberg, 2004; LaBrie, Shaffer, LaPlante, & Wechsler, 2003; Martin et al., 2014).

What can be done?

Although many college students “grow out” of these behaviors during or soon after their college years, others continue to deal with difficult issues in the decades after college. To help college students avoid experiencing these difficulties during and after college, researchers, college administrators, health professionals, and others must confront a difficult and complex set of behaviors during a sometimes-tumultuous time of life.

It is important that colleges and universities intervene to address addiction and mental health issues in their student body. The National Institute on Alcohol Abuse and Alcoholism (NIAAA) Task Force on College Drinking conducted comprehensive reviews of intervention/prevention strategies among college students and have provided empirically based recommendations for university alcohol policy and prevention strategies (National Institute on Alcohol Abuse and

Alcoholism, 2005). The NIAAA Task Force found that the following strategies are the most effective at preventing and reducing college drinking.

1. Combinations of [cognitive-behavioral skills training](#), including clarifying about alcohol use, and motivational enhancement interventions.
2. Brief [motivational enhancement interventions](#).
3. Interventions challenging students' expectations about their alcohol use.

Although these strategies have been tested most rigorously with alcohol use and misuse, they have evidenced success with other expressions of addiction, including gambling. Consequently, I encourage college health professionals to consider implementing these strategies and to explore other scientifically sound strategies that might evidence success with college students struggling with addiction.

One final note concerning treatment: because we know that individuals who experience one addiction or mental health disorder are at increased risk of experiencing co-occurring disorders, college mental health professionals should consider screening and intervening for co-occurring disorders and tailoring treatment/interventions accordingly. In other words, it is imperative to treat the addiction syndrome (Shaffer et al., 2004; Shaffer, LaPlante, & Nelson, 2012; Shaffer, LaPlante, & Nelson, 2012) and not just one expression of the syndrome.

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