



UNIVERSITY OF  
EASTERN FINLAND

# SUBSTANCE ABUSE PROGRAMME FOR STUDENTS

An action plan for preventing substance abuse and supporting interventions in case of problems

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## Introduction

Substance abuse may have a significant impact on work performance and coping with the workload. Substance habits adopted in young adulthood often continue unchanged later in life. For this reason, one must consider their substance use during their university years. A student's substance abuse problem can manifest itself, for instance, as repeated absences, lateness, inefficiency, or delayed studies. Other psychosocial problems are also often linked to a substance abuse problem, possibly hindering studies and, later, work performance.

In this programme, the term 'substance' refers to alcohol, drugs and prescription medication used with narcotic and/or intoxicating intent.

The objective of the substance abuse programme is

- to promote the ability to study and work,
- promote the health and well-being of the students,
- prevent substance abuse problems,
- make interventions for a student's substance abuse problem easier and
- improve case management.

In addition, the long-term objective of the substance abuse programme is to influence the substance use culture of the students. The programme has been drawn up in cooperation with the National Union of University Students in Finland (SYL) and the Finnish Student Health Service (FSHS).

The programme will be implemented in stages, and instead of sanctions, its objective is to emphasise prevention, identification, guidance and early intervention. In all contexts, care must be taken not to violate the legal protection of the parties. For instructions on the handling and confidentiality of sensitive information, see Chapter 6.



The University of Eastern Finland, the Joensuu and Kuopio campus crisis support teams and the wellbeing working group on the Savonlinna campus plan and coordinate preventive substance abuse work. They also coordinate the implementation of the substance abuse programme and agree on common procedures in substance abuse related matters.

The faculties (and independent institutes) have appointed substance abuse contact persons for students. The task of the substance abuse contact person is to give advice and support for intervening with students' substance abuse problems and arranging the early intervention discussions. The contact person collects reports on students removed from the classroom due to substance abuse, organises and participates in case management meetings as the representative of the university/faculty, conducts a hearing with the student on the need for drug testing, and coordinates the implementation of drug testing. Furthermore, the contact person acts as a liaison in substance abuse matters between the faculty, FSHS and, if necessary,

the nursing units. If a faculty does not have a separate, appointed substance abuse contact person for students, the tasks are, as a rule, handled by the faculty's Head of Academic and Student Affairs.

## 1. Preventive measures

### 1.1. University's role

The university promotes a drug-free study environment and the responsible use of alcohol. The students are informed of the substance abuse programme each autumn term. For instance, new students are informed during the first week of studies or during introductory courses and, where applicable, during training periods.

#### 1.1.1. Organisation of operations

The University's Joensuu and Kuopio campus crisis support teams and the wellbeing working group on the Savonlinna campus, complemented by the substance abuse contact persons of the faculties, will organise the operations. The task of the above-mentioned groups is to plan preventive social work with substance abusers, agree on common procedures, and handle other issues related to wellbeing.

#### 1.1.2. PSP counsellor/subject tutor

In the beginning of their studies, all students are appointed a PSP counsellor or a subject tutor. The PSP counsellor/subject tutor is the student's support person for questions relating to the progress of his or her studies and for guiding the student in preparing their Personal Study Plan (PSP). The PSP counsellor/subject tutors and the students meet in groups and, when necessary, individually.

During personal guidance, questions relating to the student's coping, wellbeing and substance use may arise. The University must ensure sufficient training and support so that PSP counsellors/subject tutors are able to take appropriate actions in such situations.

#### 1.1.3. Peer tutor activities

Since the first day of studying, every student has an assigned peer tutor. They are peer instructors chosen and authorised by the subject, and familiarise the new students with their own department/school, studies, senior students, and the rest of the university. The peer tutors will also induct new students into student association activities and initiate them in student traditions.

Responsible use of alcohol is a recommended subject of discussion during tutoring sessions. Events related to peer tutoring should take into consideration that not all students drink alcohol, and meetings should favour substance-free environments. Peer tutoring must never involve substance use and must always take place in a substance-free environment, as tutoring is guidance. Peer tutors and student associations may be involved in arranging social gatherings, freshman hazing, etc. for first-year students, but even then it should be noted that not everyone wishes to imbibe alcohol.

## 1.2. The role of FSHS

FSHS employees will distribute information on the effects of substance use on the health and social life of the students through both their regular activities (health examinations, reception work) and their websites, newspaper and magazine articles, and various campaigns. Practical cooperation with universities and student unions is organised through multi-disciplinary health working groups.

Information on the higher education students' substance use is collected through a nationwide student health survey every fourth year. The FSHS gives feedback to the faculties on the results of the student survey. Furthermore, FSHS gives faculty-specific feedback on the substance use and wellbeing of first-year students based on the results of the electronic health survey (Sätky).

In cooperation with the Finnish Association for Substance Abuse Prevention, FSHS has produced materials for higher education students with the goal of increasing the students' knowledge on the health impacts of substance use and guiding the student culture towards a more controlled and less harmful alcohol use. Such materials you can find from sites [www.Paihdelinkki.fi](http://www.Paihdelinkki.fi) and [www.FSHS.fi](http://www.FSHS.fi).

## 1.3. The role of student organisations

The campus crisis support teams and the wellbeing working group should have an annual discussion with representatives from the student organisations on the culture of substance use in the university's student activities. Joint agreements can be made with the student organisations on procedures supporting the responsible use of alcohol that are suitable to the university's operating environment.

Discussions should be had on, for instance, the reception of new students and student events during the first autumn. Freshman hazing, in particular, easily lead to the overuse of substances. Freshman hazing and other such events play a significant role in what kind of an idea new students get of the student community and studying culture.

# 2. Identifying a substance abuse problem

## 2.1. The role of the faculty

A student's overuse of substances may manifest as, for example, unexpected and repeated short absences; lateness, particularly in the mornings; lower academic performance; "freeloading" during group work; avoidance of the teacher or other students; vague explanations; smell of alcohol; or appearing under the influence or hung over.

If the staff grows concerned of a student's possible substance abuse problem, the matter must be immediately discussed with the student in question (see Section 4.1).

## 2.2. The role of FSHS

All FSHS employees shall strive to identify substance users at risk during medical examinations and normal appointments. The substance use of patients suffering, in particular, from sleeplessness, anxiety,

depression, stomach troubles, headaches and tiredness should be investigated as part of taking the patient's medical history.

During the first year of studying, the health and substance use of the students are surveyed during the FSHS medical examination by means of an electronic health survey completed by the students themselves. The survey includes the AUDIT test and a question about drug use.

A student whose AUDIT score is over ten points or who has used drugs is invited to visit a nurse for a health appointment, where the student's substance use, life situation and health are investigated to a greater degree. The appointment includes an early intervention discussion with follow-up visits (see Section 4.1). If the student's need for treatment is greater than this mini-intervention, treatment is assessed and planned during an appointment with a general practitioner or a specialist of psychiatry.

### 2.3. The role of students and student organisations

Students and student organisations play a key role in identifying substance abuse problems in their fellow students. Fellow students are likely to notice problems stemming from substance use more easily and earlier than others. These kinds of situations include, in particular, cases where a student hurts him or herself or gets into a fight due to being intoxicated. In the same vein, drinking alcohol up to the point of passing out or blacking out is always a sign of an alcohol problem. Drug use may involve hallucinations, delusions, and strange or aggressive behaviour. Compared to the teaching staff, fellow students are often more aware of when substance use impacts academic performance.

The university and student organisations should agree on common procedures for broaching the subject of substance abuse problems. Support for developing these procedures is available from the campus crisis support teams at the Joensuu and Kuopio campuses and the wellbeing working group in Savonlinna.

## 3. Substance abuse intervention

A substance abuse intervention and an early intervention discussion, as soon as possible, are the primary measures to be taken when a student's substance use raises concern. The earlier the substance abuse is brought up, the easier it is to reduce the harm it causes.

Support should be offered to the staff and students for intervening in substance abuse and broaching the subject of substance abuse problems. In an academic environment, such issues have traditionally not been raised very easily, and some of the members of the community may find it difficult to discuss substance abuse issues.

Concerns of substance abuse can be brought up by a member of the teaching or other staff, the PSP counsellor/subject tutor, or a fellow student. The primary objective of the substance abuse intervention and the early intervention discussion is to support the student in his or her studies. In all contexts, care must be taken not to violate the legal protection of the parties.

On certain grounds, the university may require the student to present a drug test certificate. The prerequisites for a drug test laid down in Section 43 d of the Universities Act (see Section 5) must be separately determined in each case.

### 3.1. Early intervention discussion

#### 3.1.1. Early intervention discussion by the teaching staff

Should the teaching staff become concerned of a student's possible substance abuse, the matter should be brought up with the student without delay. The student's PSP counsellor or subject tutor is the recommended person to carry out the early intervention discussion. The early intervention discussion can also be carried out by some other member of the teaching staff, with expertise or experience in early intervention discussions, or knows the student's situation best, at that time. All discussions between the teacher and student on this matter are confidential.

An early intervention discussion should take place in an open atmosphere, in which the sensitive nature of the substance abuse problem must be taken into consideration. The early intervention discussion is always carried out as a one-on-one discussion. A student's substance use may not be discussed in group situations, for example in the presence of other students. The purpose of the discussion is to express concern on the student's substance use and its impact on his or her studies and wellbeing. In such situations, the discussion, itself, acts as an early intervention, but the situation should be reassessed later, for instance after a couple of months. During the early intervention discussion, the student may also be encouraged to contact an FSHS doctor for an assessment of his or her overall situation.

If the substance use is detrimental to the student's academic performance, case management is recommended (see Section 4).

Advice and support for carrying out the early intervention discussion is available from the substance abuse contact person.

#### 3.1.2. Substance abuse contact person

The teaching staff, a PSP counsellor/subject tutor, or a student may contact the faculty's substance abuse contact person if the substance abuse of a student raises concern and they wish advice and support in intervening in the substance abuse problem. The substance abuse contact person also collects reports on students removed from the classroom due to substance abuse (Appendix 3).

The substance abuse contact person acts as a liaison between the faculty, FSHS and, if necessary, the nursing units. Furthermore, it is the substance abuse contact person's duty to ensure that the student is heard before drug testing, and coordinate/organise the drug test. The substance abuse contact person also coordinates and participates in the case management meeting as the representative of the faculty (see Section 4.1.1).

If a faculty does not have an appointed substance abuse contact person for students, the duties are assumed by the faculty's Head of Academic and Student Affairs.

### 3.1.3. The role of FSHS

Should an FSHS healthcare professional (nurse, doctor, dentist or psychologist) notice or suspect during performance of their duties that a student who is a patient is suffering from substance abuse, they shall either determine the student's substance use, substance history, somatic and mental state themselves, or refer the student to an FSHS employee with experience in assessing a substance abuse patient's need for treatment. The assessment is usually made at a general practitioner's or nurse's office. Further treatment is most commonly given either at an FSHS nurse's, general practitioner's or psychologist's office, a Youth Clinic (generally under 25 years of age) or an A-Clinic. If necessary, the student can also be referred to detoxification, institutional rehabilitation or a psychiatrist's assessment on the need for further treatment.

If the substance abuse problem is detrimental to the student's academic performance, the recommended method is to arrange a joint discussion with an FSHS employee and the student's PSP counsellor/subject tutor. An educational psychologist may also be asked to participate.

FSHS employees are bound by confidentiality, so all discussions with a patient are fully confidential, and no information, whatsoever, pertaining to them shall be conveyed to the teaching staff, if the student has sought treatment or an assessment on his or her own initiative.

If a student's substance abuse problem is noticed elsewhere than at a healthcare professional's office, such as at a teaching event, an FSHS general practitioner will participate in the student's case management meeting at the invitation of the faculty's substance abuse contact person. After the meeting, the general practitioner will assess the need for treatment, either independently or by consulting other healthcare professionals (psychologist, specialist in psychiatry).

### 3.1.4. The role of students and student organisations

If a fellow student's substance use raises concern, the subject should be broached with him or her as soon as possible, such as after a party. During the early intervention discussion, it is important to give the fellow student feedback on how his or her substance use has raised concern, or that he or she drinks too much alcohol. Advice, support and help for the early intervention discussion can be obtained from the Student Union without revealing the fellow student's identity. It is recommended to encourage the fellow student to contact FSHS for a more detailed assessment of his or her situation.

The board of a student organisation can issue a warning or a ban as a consequence of problem behaviour related to the organisation's activities. It is recommended that when a warning or ban is issued, a representative of the student organisation broach the subject of substance abuse and, if necessary, encourage the recipient of the warning or ban to visit FSHS for an assessment of his or her situation.



### 3.2. Removal from a teaching event

In accordance with Section 45 of the Universities Act, a student who disrupts teaching, behaves violently or threateningly or endangers the life or health of another person may be ordered to leave the room in which teaching is taking place, or an event arranged by the university.

If the removal from a teaching or other event was caused by substance abuse, it is recommended that an early intervention discussion be arranged in connection with the said removal or as soon as possible thereafter. Any removal is documented (Appendix 1) and delivered to the faculty's substance abuse contact person.

### 3.3. Drug testing

A drug test certificate can be required from university students in all fields, not just those to whom the SORA legislation's suitability assessment applies.

The university may require a student to present a drug test certificate, where justified, should it be suspected that the student is under the influence of drugs during practical tasks relating to studies or during practical training or that the student is addicted to drugs (Section 43 d of the Universities Act).

Further indications for the need for testing to ascertain the student's functional capacity and performance of tasks requiring particular acuity, reliability, independent judgement or quick reactions and which if working under the influence of drugs or drug addiction:

1. seriously endangers the student's or some other person's life or health;
2. seriously endangers the protection or integrity of data protected by confidentiality statutes; or
3. significantly increases the risk of illicit trafficking or distribution of substances referred to in Section 3 (1) point 5 of the Narcotics Act (373/2008) which are in the possession of the university or the place of training (Section 43 d of the Universities Act).

For drug testing, a teacher or a training instructor shall complete the first page of the form provided as Appendix 3 and deliver it to the faculty's substance abuse contact person for students. The student is permitted a hearing concerning the grounds for drug testing before being directed to take the test. The hearing is recorded on the form, and the student signs the form. The substance abuse contact person will designate a healthcare professional (usually a member of the FSHS staff) who will issue the required certificate. The certificate must be delivered to the substance abuse contact person within a reasonable time, usually set at three to five days. The university shall cover the costs incurred by the drug test certificate. It is recommended that the substance abuse contact person inform the FSHS unit when a student has been required to present a drug test certificate.

The blood or urine sample is given under monitored and controlled circumstances, following the guidelines of the Ministry of Social Issues and Health on drug testing at the workplace. The test results are interpreted by a healthcare unit that is independent of the university. The tested person shall always have the right to obtain the test results in writing.

Refusal of drug testing required by Section 43 d of the Universities Act shall lead to further measures (see Section 5).

## 4. Case management

### 4.1. Case management practices

#### 4.1.1. Case management meeting

If the substance abuse has clearly been detrimental to a student's academic performance, endangered safety or seriously endangered the student's own health, or the student's substance abuse is at the level of addiction, the substance abuse contact person or, if the faculty does not have a substance abuse contact person for students, the faculty's Head of Academic and Student Affairs shall arrange a case management meeting.

For the purposes of the case management meeting, the necessary background information is collected and the participants are sent a written invitation, which includes information on the participants and the objective of the meeting. The case management meeting shall be participated by 1) the student, 2) a representative from FSHS, 3) a representative or representatives from the faculty, and 4) the student's support person, if necessary. The representative from FSHS shall chair the meeting.

In order to expedite the case management, it is recommended that the student contact FSHS himself or herself for a determination of his or her situation and a treatment plan prior to the meeting. The contents of the visit(s) are confidential, and the discussed matters shall not be discussed in the case management meeting without the student's consent.

#### 4.1.2. Treatment commitment

A written treatment commitment (Appendix 2) shall be prepared during the case management meeting, and the further plans and a follow-up meeting are agreed for reassessment purposes.

Compliance with the treatment commitment is assessed during the follow-up meeting. If, during the treatment commitment period, the student fails to show up at an agreed appointment, or arrives while under the influence, the party providing the treatment shall notify the substance abuse contact person of the violation of the treatment commitment.

In cases where the treatment commitment has been violated, a separate discussion shall be arranged, where the student's academic performance and any consequences determined by the student's field are discussed (see Section 6). Confidentiality of the content of the treatment discussions shall be maintained in all cases.

#### 4.2. Treatment options

Forms of treatment may include outpatient treatment by the A-Clinic Foundation's Youth Clinic or an A-Clinic, FSHS, individual psychotherapy, or visits to a private-sector doctor or psychotherapist specialising in substance abuse. The need for the student's KELA-funded individual psychotherapy can be assessed by FSHS's specialist in psychiatry. If there is need for a period of institutional rehabilitation, funding is arranged in cooperation with the student's home town's social and healthcare office. The student is eligible for financial rehabilitation aid from KELA for the duration of the institutional rehabilitation period.

### 5. Substance abuse problem and consequences

In accordance with Section 45 of the Universities Act, the university may take the following disciplinary actions: remove the student from a teaching event, ban the student from attending teaching for three days, give a written warning, or suspend the student for a fixed term. The university may also revoke the student's right to study in situations referred to in the so-called SORA legislation.

#### 5.1. Removal from a teaching event

In accordance with Section 45 of the Universities Act, a student who disrupts teaching, behaves violently or threateningly or endangers the life or health of another person may be ordered to leave the room in which teaching is taking place, or an event arranged by the university. When the removal from a teaching event is caused by substance abuse, it is recommended to arrange an early intervention discussion after the situation is over and make a substance harm report to the substance abuse contact person, who will arrange a case management meeting, if necessary.

#### 5.2. Ban from attending teaching

In accordance with Section 45 of the Universities Act, a student may be banned from attending teaching for a maximum of three days where there is a danger that the safety of another student or a person working in the university or some other teaching facility is threatened as a result of the student's violent or threatening behaviour, or where the disrupting conduct of the student makes teaching and associated activities unreasonably difficult. The Rector, a member of the teaching and research staff, and the training instructor may act jointly or separately in situations referred to in Paragraph 3, Section 45 of the Act. The actions taken must be documented.

### 5.3. Written warning and suspension for a fixed term

A written warning may be given to a student who disrupts teaching, behaves violently or threateningly, acts fraudulently or otherwise disrupts order at the university, refuses to take a drug test, or has used drugs for other than medicinal purposes in a way that reduces his or her functional capacity (Section 45 of the Universities Act). The decision to give a written warning to a student shall be made by the Rector of the university.

If the student's actions were serious, or the improper behaviour continues after a written warning, the student can be suspended from the university for a period of no more than one year. The decision shall be made by the Board of the university.

### 5.4. Revocation of the right to study

When the studies impose demands concerning the safety of minors or patient or customer safety, the university may revoke the student's right to study under Section 43 a of the Universities Act, if:

1. The student by repeatedly or seriously endangering the health or safety of another person has proved to be manifestly unsuitable to perform practical assignments or training relating to studies; or
2. It is evident that the student does not fulfil the prerequisites for admission referred to in Paragraph 1, Section 37 a in regard of the state of health or functional capacity; or
3. At the application stage, the student has concealed a decision to revoke the right to study referred to in Paragraph 2, Section 37 a, which could have prevented his admission as a student; or
4. The student has been sentenced for a crime separately referred to in the law, namely indecency and sexual offences, murder, voluntary or involuntary manslaughter, aggravated assault, aggravated robbery( but not narcotics offences), if the student's studies or practice relating to studies substantially requires work with minors, where necessary in order to protect minors.

Student degrees of which the revocation of the right to study may apply are: Bachelor of Science (Pharmacy), Master of Science (Pharmacy), Bachelor and Licentiate of Dentistry, Bachelor and Master of Arts (Psychology), and Bachelor and Master of Arts (Logopedics). Additionally, the right to study by those training to be a social worker, psychotherapist or a teacher may be revoked.

In all cases, before revoking the right to study, the university, together with the student, shall explore the student's possibilities to apply for some other education. With his or her consent, the student may be transferred to some other education in the university where he or she fulfils the admission prerequisites.

The university Board shall make the decision to revoke the right to study. The right to study may be restored under the prerequisites laid down in the Act.

## 6. Processing of sensitive data and confidentiality

According to the Personal Data Act, personal data means any information on a private individual and any information on his/her personal characteristics or personal circumstances, where these are identifiable as concerning him or her or the members of his or her family or household. Sensitive data includes, for example, personal information concerning health, illness or handicap of a person, or the treatment or other comparable measures. Such data may not be processed – collected, saved, sorted, used, disclosed, stored, modified, combined, deleted, destroyed – without permission laid down by the Act or given by the person himself or herself. Universities have a statutory right to process the personal data of students and also sensitive data in order to carry out its statutory duties or obligations. (Sections 3–8 and 11–12 of the Personal Data Act)

Section 45 b of the Universities Act limits the processing of data relating to a student's health, to those who prepare or make the decision on the revocation of the right to study, restoration of the right to study, disciplinary action or who issue opinions concerning these matters. The university must specify the tasks that involve processing of sensitive data. Sensitive data must be stored separately from other personal data. It must be immediately erased from the register once there are no longer grounds for storing it required by the performance of statutory duties; howsoever no later than four years after the data has been entered into the register.

A member of the university staff who has, in the course of performing his or her duties, gained knowledge of a student's characteristics, personal situation or financial situation, shall not disclose the data to a third person (Section 33 of the Personal Data Act). All discussions and meetings related to the handling of a student's substance abuse problem are confidential, and their contents may not be disclosed to third persons. Based on their profession, healthcare personnel have a secrecy obligation concerning the health and other data of their clients.

Section 90 a, of the Universities Act contains provisions on exceptions to the provisions concerning confidentiality. The disclosure of information is limited to information concerning a student's state of health and functional capacity, which is necessary for the performance of duties. The information may be disclosed to the following persons, and their purpose of use is defined as follows:

1. The rector of a university and other persons responsible for the security of the university for the purpose of safeguarding the safety of studies;
2. Persons responsible for study counselling for the purpose of guiding the student to other studies or support services;
3. Persons responsible for student health care for the purpose of safeguarding the student's health and safety and for directing the student to the necessary support functions;
4. Persons responsible for practical training for the purpose of safeguarding the safety of the student and the safety of the personnel

and customers of the place of training; and

5. The police and a representative of the university who is primarily responsible for investigating a threat to security for the purpose of assessing an immediate threat to safety, or if the student's state of health is found to endanger the safety of others in the assessment.

Further information:

[Substance abuse and the student culture](#)

[Intoxicants and Health site](#)

[FSHS' Health Databank](#)

[Party Guide](#)

[Addictionlink](#)

[The Finnish Association for Substance Abuse Prevention](#) website, containing various tests

Sources:

The Universities Act 954/2011, the Universities Decree 770/2009 and the Personal Data Act 523/1999, including their amendments

The Ministry of Social Affairs and Health's guide on SORA legislation

The programme is based on the substance abuse programme of the Faculty of Medicine of the University of Turku

Appendix 1 Removal from a teaching event due to substance use

Name of student: \_\_\_\_\_

Personal Identity Number: \_\_\_\_\_

Course/teaching event: \_\_\_\_\_

How was the substance abuse detected:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Inebriation        | <input type="checkbox"/> Hangover                  | <input type="checkbox"/> Improper or disruptive behaviour |
| <input type="checkbox"/> Other intoxication | <input type="checkbox"/> Other withdrawal symptoms | <input type="checkbox"/> Other, describe                  |

Description of the situation:

*Student's own view of the situation:*

- Admitted substance use
- Denied substance use

---

Further measures

- Recommend drug testing
- Other plan:

---

*Teacher's signature, name in block letters and contact information*

*Date and place*

The form is delivered to the faculty's substance abuse contact person for students or, if there is none, to the Director of Faculty Administration responsible for academic affairs.

## Appendix 2 Treatment commitment

Name of student: \_\_\_\_\_

Personal Identity Number: \_\_\_\_\_

Detected detriments to academic performance from substance abuse:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Inebriation        | <input type="checkbox"/> Absences                               | <input type="checkbox"/> Neglect to perform study-related tasks |
| <input type="checkbox"/> Other intoxication | <input type="checkbox"/> Accidents                              | <input type="checkbox"/> Endangering patient safety             |
| <input type="checkbox"/> Hangover days      | <input type="checkbox"/> Difficulties in personal relationships | <input type="checkbox"/> Other detriments, describe             |

The Faculty of \_\_\_\_\_'s substance abuse contact person \_\_\_\_\_ shall act as liaison between the place of treatment and the faculty, and shall be entitled to receive information from the place of treatment concerning the student's state of health and treatment progress. The place of treatment shall notify the contact person if the treatment continues in accordance with the plan.

Due to my substance abuse problem, I hereby commit to treatment, the more detailed contents of which shall be determined in a treatment plan prepared by the health services.

---

*Student's signature, name in block letters and contact information*

*Date and place*



Appendix 3 Data transfer form to healthcare – student has been obliged to present a drug test certificate

Name of student: \_\_\_\_\_

Personal Identity Number: \_\_\_\_\_

Suspected intoxication **Place**  
**Date and time**

Name of the person who assessed the intoxicated state \_\_\_\_\_

Telephone number \_\_\_\_\_

Assessment of the intoxicated state

Speech _____ Articulate _____ Inarticulate	Responsiveness _____ Yes _____ Reduced	Sense of time and place _____ Yes _____ Reduced
Walking: _____ Steady _____ Unsteady	Reactions: _____ Normal _____ Slowed down	Smell of alcohol: _____ None _____ Yes
Appearance: _____ Calm and collected _____ Sleepy	_____ Euphoric – feeling Manic _____ Belligerent	_____ Anxious _____ Weepy
Physical symptoms _____ None _____ Tremors	_____ Restlessness _____ Vomiting	_____ Sweating

**Description of reduced functional capacity:**

Contact information of the university representative obliging the student to present a drug test certificate:

Name: \_\_\_\_\_ Telephone number: \_\_\_\_\_

\_\_\_\_\_ The student has been directed to healthcare for drug testing

Date and time

Name of the healthcare unit

Name of escort, if any

\_\_\_\_\_

Date

Signature and name in block letters

*Student's own view of the situation:*

I admit drug use/drug addiction

I deny drug use/drug addiction

---

Date

Signature

---

The student must bring a photo identification card to the drug test.

The original copy of this document is the University's copy. One copy has been given to the student, and one shall remain

at the healthcare unit.