

# INTEGRATED BEHAVIORAL HEALTH IN COLLEGIATE RECOVERY PROGRAMS

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## INTRODUCTION

**COLLEGIATE RECOVERY PROGRAMS (CRPs) PLAY A CRITICAL ROLE IN SUPPORTING STUDENTS RECOVERING FROM SUBSTANCE USE DISORDERS (SUDS) AND CO-OCCURRING MENTAL HEALTH CHALLENGES.**

Integrated behavioral health models within CRPs provide a comprehensive approach that combines academic support, counseling, and peer networks, ensuring students have access to the necessary resources for long-term recovery and academic success. This research brief synthesizes findings from key studies to highlight the significance of an integrated behavioral health approach in CRPs, with a specific focus on addressing eating disorders and sleep disorders as integral aspects of the recovery process.

# THE ROLE OF INTEGRATED BEHAVIORAL HEALTH IN COLLEGIATE RECOVERY

Integrated behavioral health (IBH) refers to the coordination of mental health, substance use treatment, and medical care within a single, cohesive system. Within CRPs, IBH ensures that students receive holistic care tailored to their academic and personal needs. By embedding behavioral health services within the university setting, CRPs create a supportive environment that fosters both recovery and educational success. The integration of care for co-occurring disorders, such as eating and sleep disorders, is critical for comprehensive recovery. These disorders often complicate SUD recovery and, when addressed within the CRP framework, enhance long-term success.



# KEY COMPONENTS OF AN INTEGRATED BEHAVIORAL HEALTH APPROACH

**INTEGRATED BEHAVIORAL HEALTH APPROACH WORKS TO IMPROVE THE OVERALL EFFECTIVENESS OF CRPS, BY BEING INCLUSIVE OF ALL DIFFERENT RECOVERY JOURNEYS.**

## 1. MENTAL HEALTH

Providing on-campus counseling and therapy to address co-occurring mental health conditions, such as anxiety and depression, which often accompany substance use disorders (Ashford, Brown, & Curtis, 2018).

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## 2. PEER SUPPORT NETWORKS

Establishing recovery communities where students support one another through shared experiences, fostering accountability and reducing stigma (Jason et al., 2021).

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## 3. ACADEMIC SUPPORT

Assisting students in balancing their education with their recovery journey, offering mentorship and career guidance to promote long-term success (Vest et al., 2021).

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## 4. INTERDISCIPLINARY COLLABORATION

Integrating expertise from psychology, social work, and public health disciplines to create different support systems that address the variety of addiction recovery (McDaniel et al., 2020).

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## 5. ADDRESSING CO-OCCURRING EATING AND SLEEP DISORDERS

Integrated treatment for different disorders as part of the recovery process ensures that students receive holistic support, addressing all aspects of their health and well-being.

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# EVIDENCE SUPPORTING INTEGRATED BEHAVIORAL HEALTH IN CRPS

- **Holistic Recovery and Academic Success:** Ashford, Brown, and Curtis (2018) emphasize the necessity of integrating behavioral health services into CRPs to provide a well-rounded support system. Their study highlights that combining mental health counseling, academic assistance, and peer support significantly improves students' recovery outcomes and academic performance. This holistic approach is critical when co-occurring disorders, such as eating and sleep disorders, are considered.
- **Addressing Stigma and Program Development:** Vest et al. (2021) conducted a PRISMA-guided scoping review that identified key challenges in CRPs, including stigma and lack of institutional investment. Their findings suggest that universities with structured IBH models see greater success in student recovery and overall program sustainability. By expanding the focus to include eating and sleep disorders, CRPs can further reduce stigma around these often-overlooked aspects of recovery.
- **Community-Based Recovery and Support Services:** Jason et al. (2021) highlight the role of recovery support services (RSS) in sustaining long-term recovery. Their study underscores the need for CRPs to integrate community-driven support systems, including interventions for co-occurring conditions such as eating and sleep disorders. These services provide students with a comprehensive approach to address the unique challenges they face in recovery, reducing the likelihood of relapse.
- **Interdisciplinary and Research-Driven Approaches:** McDaniel et al. (2020) argue for a research-informed approach to CRPs, integrating insights from various fields such as psychology and public health to optimize behavioral health interventions for students. This interdisciplinary approach is essential for tackling complex co-occurring disorders such as eating and sleep disorders, which often require specialized care.

# EVIDENCE SUPPORTING IBH IN CRPS

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# EATING DISORDERS

EATING DISORDERS ARE A SIGNIFICANT CHALLENGE FOR STUDENTS IN RECOVERY FROM SUDS. MONSOUR, KIMBALL, AND HENLEY (2020) DISCUSS THE DIFFICULTIES CRPS FACE IN PROVIDING ADEQUATE SUPPORT FOR STUDENTS WITH EATING DISORDERS, WHICH OFTEN ARISE FROM THE SAME UNDERLYING ISSUES THAT CONTRIBUTE TO SUBSTANCE USE DISORDERS. THEIR FINDINGS EMPHASIZE THE IMPORTANCE OF INTEGRATING EATING DISORDER TREATMENT WITHIN THE RECOVERY FRAMEWORK TO ENSURE THAT STUDENTS RECEIVE COMPREHENSIVE CARE. IN CRPS, THE COMBINATION OF MENTAL HEALTH COUNSELING, PEER SUPPORT, AND ACADEMIC ACCOMMODATIONS IS VITAL FOR ADDRESSING THE COMPLEXITIES OF EATING DISORDERS AND FOSTERING LASTING RECOVERY.

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# SLEEP DISORDERS

SLEEP DISORDERS, WHICH ARE COMMONLY ASSOCIATED WITH SUDS, CAN EXACERBATE RECOVERY CHALLENGES FOR STUDENTS. REID (2023) EXPLORED THE IMPACT OF SLEEP HEALTH ON RECOVERY OUTCOMES THROUGH A PILOT STUDY OF A SLEEP HEALTH INTERVENTION FOR COLLEGE STUDENTS IN RECOVERY FROM SUD. THE STUDY FOUND THAT IMPROVING SLEEP QUALITY SIGNIFICANTLY ENHANCED OVERALL RECOVERY OUTCOMES, DEMONSTRATING THE CRITICAL ROLE SLEEP PLAYS IN THE RECOVERY PROCESS. INTEGRATING SLEEP HEALTH INTERVENTIONS INTO CRPS ALLOWS STUDENTS TO ADDRESS THESE CHALLENGES, PROMOTING BETTER HEALTH OUTCOMES AND REDUCING THE RISK OF RELAPSE.

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# RECOMMENDATIONS FOR CRPS

**IN ORDER TO BETTER CRPS ON CAMPUSES THERE SHOULD BE AN INTEGRATION TO THE IBH MODEL, SO THERE IS NOT JUST A ONE-SIZE-FITS-MOST SOLUTION.**

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## **1. EXPAND ON-CAMPUS BEHAVIORAL HEALTH**

Increase access to mental health and substance use counseling tailored specifically for students in recovery, including specialized services for eating and sleep disorders.

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## **2. STRENGTHEN PEER RECOVERY SUPPORT NETWORKS**

Foster student-led recovery communities that provide mentorship, social support, and accountability, while also promoting open discussions around eating and sleep disorders.

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## **3. INTEGRATE ACADEMIC AND CAREER ASSISTANCE**

Implement academic accommodations and career guidance programs for students balancing education and recovery, with additional focus on managing co-occurring disorders.

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# CONCLUSION

**THE INTEGRATION OF BEHAVIORAL HEALTH SERVICES INTO CRPS IS ESSENTIAL FOR FOSTERING STUDENT SUCCESS AS WELL AS THEIR WELL-BEING.**

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Research supports the effectiveness of holistic approaches that combine peer support, mental health care, and academic resources. By addressing co-occurring conditions such as eating and sleep disorders, CRPs can further enhance the recovery process. Universities should prioritize investment in CRPs and adopt evidence-based models to ensure students in recovery receive the comprehensive support they need.

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**KATHERINE BALDWIN | UROP 2025**