Alcohol and Other Drugs Programming Efforts

Biennial Report

Presented to the Vice President Student Affairs on behalf of the Substance Education Concerns Committee Fall 2013

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Executive Summary

The University has an active, comprehensive and highly collaborative campus-wide program to reduce the risk associated with substance use and abuse. The program is led by the University’s Substance Education Concerns Committee (SECC). The SECC is composed of representatives from university units with significant responsibility for ATOD education and intervention; it serves as the coordinating body for all alcohol/drug education and programs conducted on campus throughout the academic year. This report represents the work of the SECC, largely carried out by its subcommittees, over the last two academic years. The report will begin with a brief descriptive overview of AOD programming. The University’s progress in meeting 2011 program goals and objectives will be discussed. Finally, the report will outline program objectives for the next two years.

PROGRAM OVERVIEW

University programming uses strategies that are either evidence-based or consistent with best practices, to reduce the risk associated with substance use and abuse, most particularly alcohol use. A strong and consistent messaging to students about AOD use and consequences revolve around three key precepts:

• The University will not condone underage drinking & irresponsible behavior

• Students must be responsible for their own choices, recognizing certain choices may bear negative consequences.

• When friends make risky choices, be a responsible friend.

Partnerships and collaboration are critical to the University’s ability to meet AOD education and prevention goals. On-campus prevention/education programs\(^1\) are the

\(^1\) A multi-pronged approach, based on the Center for Substance Abuse Prevention (CSAP) Framework, is used to (a) disseminate information to raise awareness, (b) educate to broaden knowledge and enhance skills to promote healthy behaviors, (c) identify & refer students to intervention, (d) increase community involvement on and off campus, to decrease health and safety issues related to substance use as well as (e) curb student access to illegal substances, including alcohol for those under the age of 21.
result of active engagement between the ATOD Prevention Center and Student Affairs, including but not limited to Residence Life, the Health and Counseling Centers, Campus Life, Housing & Residence Life, the Office of Student Conduct and Civility Education, as well as University Police, Academic Affairs and Athletics.

Key program initiatives focus on

• attenuating the freshmen college effect,
• facilitating successful transitions to college life,
• helping students understand their role in decisionmaking and related academic consequences and
• changing cultural expectations surrounding alcohol.

PROGRAM PROGRESS

Three specific program goals were identified as a focus for program objectives:

1. To improve the health and safety of the student population around alcohol
2. To create culture change with regard to how students drink
3. To develop a consistent method of evaluating progress in meeting goals 1 & 2

Highlights in meeting objectives include:

• Programming that has focused on a strong and consistent message about alcohol use in particular, has contributed to a steady decline in alcohol use and increased awareness of Towson University policies and programs related to alcohol and drug use. Data reports from Core surveys indicate undergraduate alcohol consumption in the past 30 days has decreased to 75.5% in 2012 compared to 81.1% in 2004. Similarly, the percentage of students reporting high risk drinking in the past two weeks was 50.8% in 2012 compared to a high of 58.8% in 2004. Although still higher than the national average, the average number of drinks consumed at this institution has decreased from 5.9 in 2010 to 5.5 in 2012. Other Core findings include decreases in reports of consequences associated with
alcohol and drug use. Student reports of public misconduct and some kind of serious personal problems related to alcohol use have decreased since 2010.

- Similar to trends noted in the Core, the National Collegiate Health Assessment surveys show a reduction in student reports of the average number of drinks the last time partied from 5.83 in 2004 to 4.19 in 2012.
- There is a consistent and notable increase in students who reported the campus is concerned about the prevention of alcohol and drug use. In 2002, 57.8% of students reported the campus was concerned about the prevention of alcohol and drug use. Ten years later, the percentage rose to 76.5%. Student awareness of alcohol/drug policies and prevention programs has also steadily increased since 2002.
- Tabulations of Blood Alcohol Concentration (BAC) based on NCHA reports of the quantity of alcohol consumed the last time they “partied” also indicate a decline. While nearly 50% of undergraduate students’ BAC levels in 2004 were equal to or higher than 0.08 (the legal drinking limit), the percentage in 2013 had declined to a 33.1%. Notably the increased use of certain protective behaviors seems to coincide with the decrease in mean number of drinks and lower calculated BAC among undergraduates.
- Since AY2010, a downward trend in the number of alcohol-related violations has been noted. The downward trend aligns with County Police reports indicating fewer Towson students are being cited for alcohol-related violations and/or noted to be involved in alcohol-related incidents within the community. Although cautious in our interpretation of these data, we believe students are responding to the consistent messaging and strict enforcement.
- Strategies to address culture change emphasize environmental management and intervention. Examples of activities in which the
University Police partnered with Baltimore County police to enforce underage drinking laws include checking students IDs at athletic events, particularly during football and lacrosse season; working with Baltimore County officers to identify underage students who visit liquor stores near the campus and attempt to purchase liquor illegally and; working with Baltimore County police who are assigned to address complaint calls related to loud and/or large parties in the off-campus community.

- A mini-grant mechanism is used to fund a Baltimore County plain-clothes, under-aged alcohol enforcement detail, focusing on false identifications, under-aged alcohol possession and open container violations.
- A student amnesty policy known as the “Responsible Tiger Protocol” [Call, Remain, Cooperate] was developed in Spring 2012. The policy initiative, introduced by Student Government representatives, was a highly successful collaboration between administrative staff and student representatives.
- The Brief Alcohol Screening and Intervention for College Students (BASICS) an evidence-based program, with funding support from the ATOD Prevention Center, was implemented Spring 2012 to provide another option for both education and self-awareness to the Towson University student community.
- As may be expected at a campus that has adopted a “no smoking” policy, cigarette use appears to be declining among undergraduate students. NCHA data indicates that most students (89%) reported not using cigarettes in the past 30 days. Of those who did, less than 5% reported smoking 10 or more days in the last month, decreasing from 17.6% in 2004 to 4.4% in 2013.

NEXT STEPS:

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2 Towson University’s “smoke-free” policy was implemented August 1, 2010.
SECC plans to continue to coordinate the resources and programs directed towards alcohol and drug education but become more strategic in how it addresses problems associated with alcohol/drug use, using data derived from multiple sources and bringing in staff, students and faculty into discussions as needed to inform policy and programs. As a group, we have discussed the importance of reinforcing information students receive in their pre-college years as well as that which is presented via AlcoholEdu. We cannot expect to implement single programs and hope that exposure to the information will lead to behavior change. Students must understand their risk. Use of alcohol with other drugs, prescribed or otherwise, puts them at greater risk for more serious health problems. Students have greater exposure to AOD information, compared to those in the past. They question messages that emphasize danger if their own experiences and those reinforced by peers suggest we are “panicking without cause,” as some students have told us. As an institution we need to continue to listen to students in order to understand the factors that contribute to the problem. We need to assure that our messages stay consistent, enforcement remains stringent, collaborations are fine-tuned and education/prevention programs reinforce key information students need to think critically about their AOD use. AOD objectives for the upcoming semester are outlined below.

**SECC GOALS for 2013-2014:**

1. To improve the health and safety of the student population around alcohol
   - To help students make responsible choices around drinking alcohol
2. To create culture change with regard to how students drink
3. To develop a consistent method of evaluating progress in meeting first two goals

**Goal 1 OBJECTIVES—Health & Safety:**

- Maintain clear behavioral expectations for students, specifically around enforcing laws and policies and maintaining personal safety around alcohol use;
- Enhance communication to students, particularly entering freshmen, to assure behavioral expectations are understood;
o Maintain current programmatic efforts, including students in the development of policies and programs;
   Address misperceptions regarding current behavior around drinking and alcohol use/abuse via stronger, more visible social norming campaign;
   Address misperceptions regarding current behavior around illicit drug use via social norming/marketing;
  o Explore next steps with Greek Life for addressing high-risk drinking;
  o Engage students in efforts to better understand specific high-risk drinking behaviors (e.g. pre-gaming) and develop educational programming to lower the rate of dangerous drinking practices;
  o Identify (and adopt as appropriate) new, innovative programming, preferably with demonstrated effectiveness, that will address underlying factors that lead to AOD use;
  o Continue to use of student peers (e.g. RA’s, OL’s, Student Ambassadors, Alcohol and Drug Peer Educators, Student Government leaders, etc.) to have meaningful discussions around alcohol use and its effects with students with whom they have contact in their prescribed roles;
  o Explore the possibility of adopting a pilot alcohol screening program, targeting specific subpopulations;
  o Enhance marketing of Responsible Tiger Protocol and incorporate in bystander intervention strategies that will help students to develop skills necessary to reduce harm to peers.

Goal 2 OBJECTIVES – Campus Culture:
• Continue environmental management strategies to decrease access to and availability of drinking, and diminish the “glorification” of drinking through contacts with such groups as community coalitions, liquor stores and retailers, tobacco merchants and those selling tobacco products (both smoked and smokeless).
• Create more campus and late night activities, using the types of activities that students enjoy (i.e., music events, fitness classes, “cool” places to hang out, etc.) to give students social choices that support healthier and safer experiences as well as promote social engagement.
• Improve communication with Academic Affairs around planned TU events that involve drinking/partying to insure students continue to attend classes and maintain satisfactory academic progress.
Educate the university community (faculty, staff and students) about student patterns of drinking, factors that contribute to high-risk drinking and associated consequences.

Begin discussions to include a parent handbook, modified from that which was developed by University of Pennsylvania researchers, and disseminate to parents to raise awareness among parents and encourage continuing conversations with their student about risk-taking behaviors.

Promote a campus culture that fosters a holistic view of health and wellness, encourages students to adopt positive, healthy behaviors and supports skill development and student self-efficacy to sustain these behaviors.

Maintain cross-college/university communication with other (local) higher education institutions around events involving alcohol and partying in order to better manage the events and subsequent fall-out problems associated with these events.

Maintain involvement with Maryland Collaborative to share information and learn about evidence-based strategies that may enhanced current programmatic responses to underage and high-risk drinking.

Goal 3 OBJECTIVES—Measuring Progress:

- Use baseline data for alcohol transports and work toward a specific target reduction of transports (especially during peak consumption times); objective would be to realize an X% reduction in transports due to alcohol (mis)use.
- Use Core and NCHA data to develop education/prevention programs addressing marijuana and prescription drugs to mitigate the effects and consequences of student use and abuse.
- Continue to monitor the number of per capita violations for the following: possession/use of alcohol, public intoxication, possession/use of False ID’s, off-campus disorderly behavior.
  - Identify cases of recidivism, efforts at intervention and student success.
  - Track how many students use the Responsible Tiger Protocol and when they are likely to use;
- Monitor referrals to BASICS, evaluating its effectiveness in addressing low level alcohol violations.
- Establish routine method for reporting the Committee’s successes to upper administration, faculty/staff and students with alcohol and drug programming.
INTRODUCTION

Towson University (TU) is committed to addressing students’ inappropriate use of alcohol and other drugs. These behaviors affect student success and have negative spill-over effects on surrounding communities. Based on data sources (e.g., Core Survey, the National Collegiate Health Assessment) decreasing trends in TU student use of alcohol have been noted in recent years, although use and perceptions of alcohol & other drug (AOD) use remain high, when compared to national reference groups. Students continue to be cited by police for alcohol or drug violations, and student transports to area hospitals due to high-risk drinking continue to be of concern.

To address these issues, the University has an active, comprehensive and highly collaborative campus-wide program to reduce the risk associated with substance use and abuse, led by its Substance Education Concerns Committee (SECC). The SECC is composed of representatives from university units with significant responsibility for ATOD education and intervention; it serves as the coordinating body for all alcohol/drug education and programs conducted on campus throughout the academic year. This report represents the work of the SECC, largely carried out by its subcommittees, in the last two academic years. The report will begin with a brief descriptive overview of AOD programming. The University’s progress in meeting 2011 program goals and objectives will be discussed. Finally, the report will outline program objectives for the next two years.

OVERVIEW -- AOD EDUCATION AND PREVENTION, 2013

As noted, the University maintains a comprehensive and highly collaborative campus-wide program, using strategies that are either evidence-based or consistent with best practices, to reduce the risk associated with substance use and abuse, most particularly alcohol use. University programming to address AOD use and abuse emphasizes a strong and consistent message to students, revolving around three key precepts:

• The University will not condone underage drinking & irresponsible behavior
• Students must be responsible for their own choices, recognizing certain choices may bear negative consequences.

• When friends make risky choices, be a responsible friend.

The SECC is instrumental in identifying common goals, developing alliances and supporting collaboration. It serves as the coordinating body for all alcohol/drug education and programs conducted on campus throughout the academic year. The committee structure offers a forum for member staff to oversee alcohol prevention activities, monitor alcohol use trends on campus and review alcohol-related policies and enforcement practices, recommending changes to Vice President of Student Affairs, as appropriate.

The SECC meets quarterly. It accomplishes much of its work through subcommittees that focus on (1) Programming and (2) Policy. Although the Policy Subcommittee meets as needed, the Programming Subcommittee meets monthly. Its charge is to focus on planning the timing and sequencing of programs so that AOD messages related to safety and risk are placed at times when students are most receptive, i.e., the beginning of school, over the course of the first six weeks of classes, and at certain times of the year when students are more likely to consume alcohol or other drugs in unsafe ways, i.e., Homecoming, Halloween, Spring Break, and Tigerfest. Key data sources used by the subcommittee to identify need and evaluate outcomes include, but are not limited to, the Core Survey and National Collegiate Health Assessment as well as judicial sanction and AlcoholEdu reports.

Partnerships and collaboration are critical to the University’s ability to meet AOD education and prevention goals. On-campus prevention/education programs\(^3\) are the result of collaborative activities between the ATOD Prevention Center and Student Affairs, including but not limited to Residence Life, the Health and Counseling Centers, ...

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\(^3\) A multi-pronged approach, based on the Center for Substance Abuse Prevention (CSAP) Framework, is used to (a) disseminate information to raise awareness, (b) educate to broaden knowledge and enhance skills to promote healthy behaviors, (c) identify & refer students to intervention, (d) increase community involvement on and off campus, to decrease health and safety issues related to substance use as well as (e) curb student access to illegal substances, including alcohol for those under the age of 21.
Campus Life, New Student programs, and the Office of Student Conduct and Civility Education, as well as University Police, Academic Affairs and Athletics.

The Alcohol, Tobacco & Other Drug (ATOD) Prevention Center, funded by a grant from the Maryland Alcohol Drug Abuse Administration, is an important partner in the university’s overall goal of reducing risk-taking behaviors associated with the use of alcohol, tobacco and other drugs. Due to the extensive collaborative relationships between Student and Academic Affairs in the direction of AOD prevention efforts on and off campus, the directorship of the Center was recently split to include a Co-directors representing Academic Affairs and Student Affairs. The Academic Affairs Director will oversee the “research to practice” needs associated with the Center’s work (i.e., data collection & analysis for purposes of needs assessment and evaluation, assuring the greatest use of evidence-based/best practice programming strategies and remaining current on research trends and empirical findings that can inform the SECC). The Student Affairs Co-director will be largely responsible for facilitating and sustaining collaborative relationships with partners on campus, specifically as it relates to direct programming oversight, supervision of ATOD peer educators as well as other day to day activities in which the Center is involved.

Each director will continue to foster relationships within and between Academic and Student Affairs, as well as Athletics and University Police to provide a campus environment that is conducive to academic success and well-being. The ATOD Prevention Center will be responsible for the organization and implementation of various types of prevention and education activities (e.g., alcohol free social events, alcohol awareness activities, peer education programming, etc.) but will continue to use grant funds to sponsor ATOD prevention/risk reduction activities led by other divisions collaborating with the Center. Each Director will also serve as members of the University’s Substance Education Concerns Committee (SECC) and its subcommittees.

KEY AOD PROGRAMMING INITIATIVES

--Freshmen & the “College Effect”
Freshmen, members of Greek organizations and athletes\textsuperscript{4} are targeted by the University for specific prevention and education programs. Programming to target freshmen begins prior to Orientation. The University requests that matriculating freshmen complete “AlcoholEdu for Colleges,” a computer-based educational self-assessment of drinking behaviors. Described as “an objective, science-based, online alcohol prevention program” “AlcoholEdu” is designed to provide students with information about their drinking behaviors while also providing colleges with descriptive information of the “alcohol-related attitudes, experiences, behaviors and health education needs of their students.”

Beginning AY 2005-2006, TU chose to use the AlcoholEdu pre-matriculation model in which students, under an implied mandate, are told to complete the course prior to their starting college at Towson.\textsuperscript{5} AlcoholEdu, an online educational program, provides its program in three modules, two of which are completed before the student comes on campus while the third is completed several weeks after the student has started the fall semester. The online program assesses student knowledge about alcohol and its effects as well as collects information about use and perceptions of peers’ use. AlcoholEdu’s designers believe that the program attenuates a predictable Increase in high risk drinking behavior -- “the college effect”—which begins even before students arrive for Orientation. Reports obtained from student participation in AlcoholEdu offer additional insights about freshmen student perceptions of and behaviors related to the use of alcohol that guide programming. Highlights from the 2013AlcoholEdu Executive Report will be discussed later in this report.

\textsuperscript{4} Towson University is committed to student success. Athletics has established the STUDENT SUCCESS program that focuses on life-skill education and prevention of high-risk behaviors. Members of the SECC work with the Associate Director of Athletics, to co-sponsor educational events that may be beneficial for athletes but may also benefit the general student population.

\textsuperscript{5} It is important to note that over the years, 95\% of entering freshmen complete Survey 1. Of those who do, more than 2/3\textsuperscript{rd} complete the remainder of the program.
Freshmen Orientation is an intense programming effort that not only focuses on introducing matriculating freshmen to college life but has increasingly included structured programming to facilitate successful transitions, helping freshmen understand their role in decisionmaking and the consequences of decisions that can occur socially and academically. Strong collaborations between New Student Programs, Housing & Residence Life, Academic Advising have resulted in coordinated programming focused on common goals that underlie student success, including high-risk behaviors (i.e., AOD use). The ATOD Prevention Center provides resources to assist in the training of First Year Experience (FYE) faculty and staff advisors as well as student orientation leaders about high risk drinking and drug taking behavior of incoming freshmen. Different types of resources (e.g., videos, brochures, peer educators) are made available to FYE advisors and other faculty throughout the academic year to assist in educating students about the risks associated with drug use and high-risk drinking. The year-long program is coordinated by the Academic Advising Center with the purpose of helping new freshmen make a successful transition to college life. FYE advisors and student orientation leaders are partnered together to provide intensive advising and mentoring support, particularly during the fall semester. Advisor and student leader training provides insights into problematic student behaviors that can impinge on student success. Student perceptions of AOD use, trends in risky behaviors among Towson students, and a range of resources that can be used to raise student awareness are included in these training sessions.

During Orientation, small group discussions with incoming freshmen, led by FYE advisors, Student Affairs staff and student Orientation leaders, provide a venue for students and faculty to discuss decisions that can either support or hamper a student’s ability to reach academic potential and develop fulfilling career options. The discussions focus on student goals and the factors that influence decision-making while attending college. These discussions can be initiated by FYE advisors, Orientation leaders or prompted as part of a programming activity, like Social Action Theatre performances, whereby student actors perform skits using risk-behavior situations for
the purpose of engaging students and provoking their responses to scenarios presented by the actors.

--Raising Awareness among Greeks

Although Greek Life at Towson University is small relative to other universities its size, student interest in Greek organizations is growing. The University employs a full time director and Greek members are required to participate in educational programs focused on topics like hazing, substance abuse and sexual assault. The University enforces strong “Social Event” policies. Administrators and students discuss the University’s and national fraternity/sorority policies for student parties and activities as well as liability issues around activities with alcohol that can affect their organizations. TIPS training, an important element of this work, is part of a larger initiative involving Student Affairs and its divisions, to educate student leaders about alcohol and drug use issues that affect the Towson University campus and surrounding communities.

--Changing Cultural Expectations Surrounding Alcohol

AOD programmatic activities are generally cyclic in nature, starting with planning for “Welcome Back” activities in the Fall and ending with “safe break” events prior to graduation. Staff health educators in both the Counseling Center and Health Center offer a range of knowledge and expertise, contributing to enhancements in prevention programming on campus. The peer education program, under the leadership of these professionals, has been instrumental in delivering information to students living in residence halls, eating in dining areas and hanging out at sites around campus. Peer Education programming has been developed by the Centers to address underlying factors that may contribute to high-risk drinking (e.g., social anxiety, nutritional issues, stress, etc.). In addition, ATOD peer educators are responsible for delivering a 3-hour risk reduction program that is mandated for students who are given minor alcohol violations. They are also available to faculty as part of the “Don’t Cancel That Class”
program where in-class instruction about alcohol use and its negative consequences is provided to students by these trained peers.

An emphasis in programming has been placed in trying to raise student awareness of risk related to alcohol use (e.g., physical and sexual assault, judicial consequences, etc.). Collaborations between University partners on campus have been strengthened to improve the visibility of alcohol/drug prevention programs and to institute more consistent messages to students and parents. Reducing harm and highlighting students’ responsibility for problematic behaviors associated with substance use has become a focal point of social marketing efforts. The social marketing campaign continues using two basic types of messages: those that focus on consequences of use and those that provide information to reduce harm. A social norming campaign to adjust student perceptions about alcohol and marijuana use by Towson students is included. In this last academic year, the Office of Student Conduct and Civility led the development of a social norm/marketing campaign, known as “Keep It Simple.” The messaging campaign, originally developed by Cornell University, is based on research that focuses on the way the brain processes information when making health behavior decisions.

Engaging student leaders in “alcohol conversations,’ was an initiative that began Fall 2010. A format for training Residence Assistants was developed by the Director of Residence Life with data and feedback on structure and organization of the facilitated discussions provided by the ATOD Prevention Center Director. The “conversations” are designed to engage student leaders in discussions with their peers about challenges alcohol use presents to members and organizations. These types of discussions are encouraged during regularly scheduled meetings of student organizations.

To inform parents of the importance of conversations with their college-bound children about peer pressure and associated transitions to college life, a “Message to Parents about College Students and Alcohol” is published in Summer issue of “TIGER PRIDE.” Parents are encouraged to participate in “Parent Drive-In” sessions, a one-stop orientation for parents and family members of incoming TU freshmen. Parents will have
the opportunity to learn about some of the key transitional issues including AOD use and other high-risk behaviors. Student Affairs staff discuss developmental issues that influence student decisions and behaviors.

Our work to **raise campus awareness of the issues and encourage faculty involvement** via classroom discussion and other types of course-related projects is ongoing. A brochure, entitled “Changing the Culture: What Faculty Can Do” was developed by the ATOD Prevention Center and disseminated to faculty, offering course suggestions about ways to educate students about their risks and provide ideas for healthier and safer college experiences. Core Survey results are also sent to faculty and academic advisors.

Engaging off-campus communities in this effort is important. The ATOD Prevention Center sponsors meetings and events with academic institutions within the metropolitan Baltimore region, maintaining regular contact to foster opportunities for collaboration in reducing underage and high-risk drinking on college campuses, provide opportunities to share experiences and disseminate information on evidence-based strategies. These interactions have led to the identification of common challenges faced by academic institutions trying to reduce high-risk drinking in the region.

Towson University is an active partner with off-campus constituencies whose aim is to reduce conflict within neighborhoods between neighbors and student residents by addressing student behavior off campus and by educating students about their responsibilities as a good neighbor. Through its University Relations Subcommittee, composed of neighborhood representatives, university administrators, local police and government representatives, including the Towson Chamber of Commerce, there is opportunity at its monthly meetings for members to share concerns and develop solutions to address problems. A student community ambassador meets with students to discuss neighborhood expectations related to noise, trash and party behavior. Workshops are available to students considering living off campus to provide information about a range of topics, from leasing to community living expectations. The Associate Vice President for Student Affairs also leads active collaborations with the
Baltimore County Police, the County State Attorney’s Office, the County Liquor Board and the County Code Enforcement Department. The Associate VP along with Office of Student Conduct and Civility staff participate in two Baltimore City groups: Student-Neighbor Housing Committee and the Baltimore City College and University Alcohol Coalition. In addition, the ATOD Prevention Center and members of the campus community who represent the Counseling Center, Office of Student Conduct and Civility Education, Housing and Residence Life and University Police are active participants in Baltimore County’s “Combating Underage Drinking” Coalition, under the leadership of the Bureau of Behavioral Health. The coalition consists of local college and university representatives, county substance abuse officials, county police, county and city liquor board officials, and some local bar and liquor store merchants.

---Enforcement and Intervention

Stringent penalties for student violations of the University’s alcohol/drug policy may include, but not be limited to parental notification, mandatory counseling and suspension or dismissal from university housing and academic suspension or dismissal. An off-campus policy has been implemented to address community complaints involving students living in off-campus housing. The off-campus program, which includes a “friendly warning” visit, provides education to students living off campus on ways to be a responsible neighbor. If a “house” becomes a problem after the visit, student disruptive behavior is adjudicated; hefty fines may be imposed.

University police partner with Baltimore County police to reduce underage students’ access to alcohol off-campus. A collaborative arrangement exists with Baltimore County police whereby students given citations for alcohol/drug use are reported to the Office of Student Conduct and Civility Education so that appropriate University sanctions may be imposed for violating the alcohol/drug use policy.

The ATOD Prevention Center supports University Police in their collaborations with Baltimore County Police to reduce alcohol access to underage drinkers (e.g. using drivers’ license scanners to identify fake IDs, retail compliance checks through the
Baltimore County “Minor’s Details” program and the “Cops in Shops” program that targets underage youth attempting to purchase, etc.

During “high activity” events (e.g., Homecoming, TigerFest), as well as Friday and Saturday nights through Halloween, Student Affairs provides grants to the Baltimore County Police for additional officers to patrol residential areas and respond to disruptive and disorderly behavior that is often attributed to alcohol use and heavy “partying.” The ATOD Prevention Center will help sponsor this grant activity to reduce alcohol-related issues in the neighborhoods and reinforce messages that these behaviors will not be tolerated.

With respect to specific counseling intervention, there are several different ways that Towson University students may access alcohol/drug treatment. The Counseling Center conducts various individual and group counseling programs, including a court-approved program for those who have received a DWI citation. The Department of Health and Mental Hygiene has certified this program since 1989.

First, students may self-refer for treatment to the University’s Counseling Center or other drug/alcohol programs within the area. Second, students who seek medical care from the Dowell Health Center may be referred to the Counseling Center or other programs, such as those offered through Sheppard Pratt Hospital. Finally, the Director of Student Conduct and Civility Education may refer students who violate University alcohol policies to a mandatory drug treatment/education program. Students who do not comply risk suspension from school. Depending on the nature of the violation, students may be referred to the Counseling Center to attend:

- “Party 101,” a 3-hour risk reduction program led by peer educators;
- BASICS, an evidence-based brief assessment, screening & intervention program;
- the Alcohol and Drug Awareness and Education program, a 12-hour intervention and education program, or;
- Substance Therapy/DWI outpatient program for those who demonstrate clinical signs of abuse or dependence.
The 12 hour intervention/education program is designed for those who engage in heavy drinking or other drug use and are at-risk for dependence problems. Counselors work to help the student identify maladaptive behaviors and become more knowledgeable about the risks associated with the use of alcohol and drugs. The Substance Therapy/DWI program is a six-month outpatient program focused on education about chemical dependency and recovery, abstinence from use, networking for the support of others to not use and finding activities that support continued recovery.

Program Progress

In the previous report, three specific program goals were identified as a focus for program objectives:

1. To improve the health and safety of the student population around alcohol
2. To create culture change with regard to how students drink
3. To develop a consistent method of evaluating progress in meeting goals 1 & 2

Progress in meeting objectives associated with each goal are discussed below.

--Goal 1: Health & Safety

Objectives in this area focus on establishing and communicating to students clear behavioral expectations around alcohol use. Freshmen, as a group, are targeted for these messages using Orientation programming and their peers to present discrepancies between perceptions and actual use and encourage small group discussions that relate the effects of high-risk drinking on student success. Strategies such as the use of Social Action Theatre, “think fast” etc., get students’ attention in ways that are fun, are relatable to their own experiences and lead-in to open discussion. Other programming led by peer educators, such as interactive tabling where information is distributed, trivia games are played, etc., are purposeful in the goal of engaging students in discussions to help them understand health risks associated with heavy drinking as well as offering strategies to reduce these risks. These programs are often held in Residence Halls on Thursday evenings, a popular night for weekend “pre-
partying,” when “I’m fun sober” buttons and standard size (12 oz) plastic cups with prevention information are distributed.

The Director of Greek Life has made a formidable effort to raise awareness about risks and consequences associated with alcohol use by requiring all Greek Council members and new members be TIPS trained. Over the last 2 years, Fraternity and Sorority Life began contacting liquor establishments where student Greek organizations want to hold parties and ask them to agree to appropriate business practices. Chairs, social chairs, and the presidents of the executive boards of most Greek chapters have participated in TIPS training. During the spring 2012 semester, the TIPS training initiative was expanded to include all male new members (pledges) and select female new members. In the past academic year, nearly 350 students, fraternity and sorority members as well as rugby students, were trained by the Director of Greek Life. He also conducted training for 10 University staff in Athletics and Event Conference Services to help with intervention strategies at events on campus. He conducted a “train the trainer” program for staff to increase the availability of TIPS trainers on campus, effectively extending the program to Campus Recreation clubs. Importantly, evaluations of this effort indicate that Greek leaders and members are very positive about the training. In addition, the timing of sorority Greek rush has been changed to occur in spring rather than fall semesters.

We believe programming that has focused on a strong and consistent message about alcohol use in particular, has contributed to a steady decline in alcohol use and increased awareness of Towson University policies and programs related to alcohol and drug use (See Table 1). Based on a comparison of Core Survey results, undergraduate reports of alcohol consumption in the past 30 days have decreased to 75.5% in 2012 compared to 81.1% in 2004. Similarly, the percentage of students reporting high risk drinking in the past two weeks was 50.8% in 2012 compared to a high of 58.8% in 2004.
Although still higher than the national average, the average number of drinks consumed at this institution has decreased from 5.9 in 2010 to 5.5 in 2012. Other Core findings include decreases in reports of consequences associated with alcohol and drug use. Student reports of public misconduct (44.4%) and some kind of serious personal problems (21.7%) decreased when compared to 2010 reports (47.4%, 27.2%).

![Student Drink Consumption, Core & NCHA Data--2004-2013](image)
respectively). In addition, there is a consistent and notable increase in students who reported the campus is concerned about the prevention of alcohol and drug use. In 2002, the Core Survey of undergraduate students indicated that 57.8% of students reported the campus was concerned about the prevention of alcohol and drug use. Ten years later, the percentage who reported the campus is concerned rose to 76.5%. Student awareness of alcohol/drug policies and prevention programs has also steadily increased since 2002.

### Table 2. NCHA RESULTS 2004-2013

<table>
<thead>
<tr>
<th>Undergraduate Alcohol Use &amp; Consequences</th>
<th>2004</th>
<th>2007</th>
<th>2009</th>
<th>2011</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>30-day Alcohol Use</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never used</td>
<td>14.3</td>
<td>15.4</td>
<td>14.6</td>
<td>19.7</td>
<td>21.1</td>
</tr>
<tr>
<td>Any</td>
<td>74.9</td>
<td>70.0</td>
<td>74.5</td>
<td>67.5</td>
<td>78.9</td>
</tr>
<tr>
<td>10 or more days/mo.</td>
<td>19.9</td>
<td>16.4</td>
<td>21.1</td>
<td>14.0</td>
<td>12.5</td>
</tr>
<tr>
<td>High-Risk Drinking in last 2 weeks</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 or more drinks/setting in last 2 wks</td>
<td>43.2</td>
<td>42.8</td>
<td>46.4</td>
<td>45.9</td>
<td>32.7</td>
</tr>
<tr>
<td>3 or more times in last 2 wks</td>
<td>20.3</td>
<td>17.4</td>
<td>20.6</td>
<td>15.1</td>
<td>9.2</td>
</tr>
<tr>
<td>Quantity of Alcohol Consumed last time</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>partied/socialized</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mean # drinks</td>
<td>5.83</td>
<td>5.21</td>
<td>5.56</td>
<td>4.68</td>
<td>4.19</td>
</tr>
<tr>
<td>Mean BAC last time partied</td>
<td>0.098</td>
<td>0.090</td>
<td>0.086</td>
<td>0.073</td>
<td>0.06</td>
</tr>
<tr>
<td>Protective Measures when drinking (Usually/Always):</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Avoided drinking games</td>
<td>37.3</td>
<td>29.4</td>
<td>32.1</td>
<td>31.4</td>
<td>35.4</td>
</tr>
<tr>
<td>Eat before/during drinking</td>
<td>79.5</td>
<td>81.2</td>
<td>80.0</td>
<td>81.1</td>
<td>82</td>
</tr>
<tr>
<td>Kept track of # drinks consumed</td>
<td>64.9</td>
<td>66.3</td>
<td>60.4</td>
<td>68.0</td>
<td>66.3</td>
</tr>
<tr>
<td>Paced to 1 per hr or less</td>
<td>29.0</td>
<td>28.4</td>
<td>24.6</td>
<td>32.0</td>
<td>35.1</td>
</tr>
<tr>
<td>Designated a driver</td>
<td>80.0</td>
<td>81.1</td>
<td>82.9</td>
<td>84.3</td>
<td>83.9</td>
</tr>
<tr>
<td>Negative Consequences after drinking:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drove after 5+ drinks (in last 30 d):</td>
<td>9.3</td>
<td>8.0</td>
<td>3.7</td>
<td>4.5</td>
<td>3.5</td>
</tr>
<tr>
<td>Drove after drinking any alcohol (in lst 30 d)</td>
<td>45.2</td>
<td>40.0</td>
<td>29.4</td>
<td>27.2</td>
<td>26.6</td>
</tr>
<tr>
<td>Memory Loss</td>
<td>34.3</td>
<td>37.4</td>
<td>35.5</td>
<td>32.9</td>
<td>31.6</td>
</tr>
<tr>
<td>Neg. impact on Academic Perf. Last 12 mos.</td>
<td>15.1</td>
<td>12.2</td>
<td>8.6</td>
<td>5.1</td>
<td>3.4</td>
</tr>
<tr>
<td>Injured self</td>
<td>22.8</td>
<td>26.7</td>
<td>19.1</td>
<td>17.9</td>
<td>14.4</td>
</tr>
<tr>
<td>Injured another</td>
<td>6.6</td>
<td>5.2</td>
<td>4.1</td>
<td>3.7</td>
<td>1.6</td>
</tr>
<tr>
<td>Forced sex or threat of force</td>
<td>1.6</td>
<td>2.0</td>
<td>2.9</td>
<td>1.8</td>
<td>1.0</td>
</tr>
<tr>
<td>Had unprotected sex</td>
<td>21.2</td>
<td>19.6</td>
<td>21.3</td>
<td>20.4</td>
<td>21.6</td>
</tr>
</tbody>
</table>

Trends noted from results of the Core are consistent with those from the National Collegiate Health Assessment (NCHA) surveys. Tabulations of Blood Alcohol Concentration (BAC) based on NCHA reports of the quantity of alcohol consumed the
last time they “partied” also indicate a decline across years (See Table 2). While nearly 50% of undergraduate students’ BAC levels in 2004 were equal to or higher than 0.08 (the legal drinking limit), the percentage in 2013 had declined to a 33.1%. Notably the increased use of certain protective behaviors seems to coincide with the decrease in mean number of drinks and lower calculated BAC among undergraduates. For example, higher percentages of students reported pacing drinks to 1 or less per hour (35.1% in 2013 compared to 21% in 2004) and keeping track of number drinks consumed (66.3% in 2011 compared to 64.9% in 2004). A common protective behavior adopted by a majority of students (82%) is eating before and/or during drinking remains. Most undergraduates report designating a driver when drinking, a practice noted to have slightly increased (80% in 2004 compared to nearly 84% in 2013).

Finally, with more strict enforcement, an increase in violations is expected. Between 2006 and 2009, alcohol-related violations, particularly those that occurred off-campus, increased 8%\(^6\). However, since AY2010, a downward trend in the number of alcohol-related violations has been noted. The downward trend aligns with County Police reports indicating fewer Towson students are being cited for alcohol-related violations and/or noted to be involved in alcohol-related incidents within the community. Although cautious in our interpretation of these data, we believe students are responding to the consistent messaging and strict enforcement.

--Goal 2: Culture Change

Objectives in this area consisted of (a) using environmental methodologies to decrease access to and availability of alcohol; (b) implementing Brief Alcohol Screening & Intervention for College students (B ASICS); (c) creating more campus and late night activities to promote social engagement and support healthier & safer experiences; (d) raising faculty awareness of student patterns of drinking, (d) increasing involvement with other Maryland institutions of higher education to better manage events and associated issues, and (e) collaborating with student leaders to develop a protocol for

\(^6\) It is important to note the total undergraduate population since AY 2006 has grown approximately 14%.
student groups and individuals who may want to report peer’s problematic drinking but who may fear sanctions if they do. Each of these objectives has been met or shows continuous advancement.

**Decreasing Access/Availability to Alcohol**

Examples of activities in which the University Police partnered with Baltimore County police to enforce underage drinking laws this past year include checking students IDs at athletic events, particularly during football and lacrosse season; working with Baltimore County officers to identify underage students who visit liquor stores near the campus and attempt to purchase liquor illegally and; working with Baltimore County police who are assigned to address complaint calls related to loud and/or large parties in the off-campus community. In addition, The ATOD Prevention Center has used its mini-grant mechanism to fund a Baltimore County plain-clothes, under-aged alcohol enforcement detail, focusing on false identifications, under-aged alcohol possession and open container violations. The officers conducted compliance checks for under-aged persons as they enter various liquor establishments, proactively patrolled on foot and by motor vehicle for open container violations and verified all identifications presented. The detail coincided with four selected nights (11 p.m. to 3 a.m.) of known high alcohol consumption by under-aged drinkers during the spring semester.

**Expanding Screening**

The Brief Alcohol Screening and Intervention for College Students (BASICS) an evidence-based program, with funding support from the ATOD Prevention Center, was implemented Spring 2012 to provide another option for both education and self-awareness to the Towson University student community. The Counseling Center provides BASICS (and a slightly modified version of the program for marijuana users) to students who:

(a) are sanctioned for low-level alcohol offenses,
(b) attend an assessment for a substance abuse related incident, (i.e., marijuana use) and
(c) are assessed in the initial intake to determine if they are an appropriate candidate for this program.
Approximately 100 students have been referred to the program; about 98% of students completed both visits.

**Health Promotion**

Health educators have been working together with other divisions of Student Affairs to organize evening social events that also have an educational component to address high-risk behaviors or underlying factors that may contribute to high-risk behaviors. These are not just alternative, non-alcohol events but rather planned social/educational events that use data from the National Collegiate Health Assessment (NCHA) to incorporate a holistic approach to high-risk health behaviors that are associated with high-risk drinking behaviors (e.g., social anxiety, stress, nutrition, etc.). For example, the “Meet & Greet” is an event that incorporates skill-building techniques to help students feel more comfortable making connections with other students, while also addressing student perceptions about alcohol’s use as a social lubricant.

Another particularly popular prevention effort, the “House Party Simulation,” was repeated this year, using Halloween to add a “haunting” tone to the non-alcoholic event. “House Party” is an educational simulation, highly collaborative in its planning and organization, involving staff, faculty and peer educators. Objectives include (1) increasing student knowledge of high-risk drinking (pharmacological & biological effects, interaction effects, etc.); (2) raising student awareness of the social, legal and academic consequences on and off campus and; (3) reinforcing student knowledge to clarify appropriate responses and decisions when use may affect the health, safety of self or friends. The event also gives students an opportunity to have fun sober.

Over 300 students attended the event in October. Of those who completed an online evaluation (N=128), nearly 95% reported satisfaction with the event; 70% indicated they would attend such an event again. Overall, 3/4 of students reported an increase in knowledge of pharmacological/biological effects of high-risk drinking, and consequences law and policy violations. One quarter to 1/3 reported significant increase in knowledge and awareness as a result of attending the event. A poster describing the
educational strategy was presented at the American Public Health Association meeting in November, 2012.

Finally, as may be expected at a campus that has adopted a “no smoking” policy\(^7\), cigarette use appears to be declining among undergraduate students. NCHA data indicates that most students (89%) reported not using cigarettes in the past 30 days. Of those who smoked, less than 5% reported smoking 10 or more days in the last month, decreasing from 17.6% in 2004 to 4.4% in 2013.

**Encouraging Student Leadership Collaboration**

In line with efforts to promote responsible behaviors when using alcohol, a student amnesty policy known as the “Responsible Tiger Protocol” [Call, Remain, Cooperate] was developed in Spring 2012. The policy initiative, introduced by Student Government representatives, was a highly successful collaboration between administrative staff and student representatives. Promotion of the protocol began in Fall 2012 and we are monitoring to determine level of campus awareness and when it is reported to be used by students.

**Faculty Awareness & Involvement**

Based on observation and anecdotal evidence, the ATOD Center’s information dissemination to faculty has led to more classroom discussions/assignments, etc. in which students explore issues associated with AOD use on college campuses. Faculty often share information with the ATOD Prevention Center director about ways in which alcohol/drug topics are incorporated in coursework. They express concern about student behavior and have contacted the ATOD Prevention Center for additional information. Core Survey data is being used to teach students statistics and foster discussion of student perceptions and use of drugs. More frequently, students will contact the Director for interviews related to class projects in mass communication, sociology, health science and family studies.

**Expanding Collaborations to Address Underage & High Risk Drinking**

\(^7\) Towson University’s “smoke-free” policy was implemented August 1, 2010.
In addition to involvement with the Baltimore County Coalition to Address Underage Drinking, key members of the SECC have been involved in efforts at the USM level, to develop a statewide higher education initiative to address underage and high-risk drinking. The purpose of the Maryland Collaborative to Reduce College Drinking is to help colleges in the state to address the problem using strategic planning and evidence-based practices that demonstrate effectiveness.

--Goal 3: Measuring Progress--What Does the Data Tell Us?

While variations in results between data sources exist, there are sufficient consistencies to help frame the issues. Some changes in specific measures appear to be moving in positive directions. Yet, Towson students remain at risk when they consume large quantities of alcohol and/or mix alcohol with other drugs. Aspects of the college environment as well as the external community, continue to present opportunities to engage in drinking behaviors that increase the likelihood of health, academic and legal problems.

High-risk drinking for incoming freshmen remains notable. Nearly 58.4% of incoming Towson University students reported drinking alcohol in the previous 30 days based on 2012 Core data. Though lower than national reference groups, about 38% of Fall 2012 freshmen reported engaging in high-risk drinking (5+ drinks in a row) two weeks prior to Freshmen Orientation. Towson University freshmen, at the time of Orientation, reported consuming 3.6 drinks per week (compared to 4.6, nationally) and experienced lower percentages of problematic incidents associated with alcohol use. By the time Survey 3 is completed by freshmen, AlcoholEdu reports indicate that drinking rates are slightly above the national average.

Pre-partying behaviors that raise BAC quickly are problematic among Towson

<table>
<thead>
<tr>
<th>Table3. AlcoholEdu—Drinking-related risk behaviors</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>When you drink, do you do the following?</strong></td>
</tr>
<tr>
<td>Pregaming</td>
</tr>
<tr>
<td>Doing Shots</td>
</tr>
<tr>
<td>Chugging alcohol</td>
</tr>
<tr>
<td>Choosing a drink containing more alcohol</td>
</tr>
</tbody>
</table>
freshmen (Table 3). This is consistent with NCHA results that indicate the popularity of Beer Pong and other games remains a problem with only about one third of students reporting that they avoid these games always or most of the time. In addition, although transports to area hospitals due to alcohol-related conditions are small relative to the size of the undergraduate population, the number of transports has increased since 2010. Most transports involve freshmen.

Risk behaviors with the greatest increases were noted for those who reported “doing shots” and those who reported drinking before going out (pre-gaming). These behaviors raise blood alcohol concentrations quickly and lower inhibitions before a social event (Table 4). Students perceive alcohol as having a positive effect, viewing it as a social lubricant. However, the problems students experience when they drink are due to a lack of understanding about (a) alcohol content in a drink and (b) the metabolism of alcohol as well as (c) underlying mental health issues (e.g., social anxiety).

The cost associated with drinking in bars, greater difficulty getting into drinking establishments due to increased enforcement, etc. may contribute to these drinking patterns. Many more TU freshmen are reporting they drink in an off-campus residence/apartment (61%) rather than in an on-campus residence (14%) or a bar/nightclub (8%).

High-risk drinking behaviors do not end once students become sophomores. More freshmen report their drinking has increased in the last 12 months, but nearly ¼ to 1/5 of students in other academic classifications also report an increase in drinking.

<table>
<thead>
<tr>
<th>Table 4. AlcoholEdu—Top 5 reasons for drinking alcoholic beverages:</th>
<th>Percentage Important/Very Important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Towson</td>
<td>National</td>
</tr>
<tr>
<td>To have a good time with friends</td>
<td>52%</td>
</tr>
<tr>
<td>To celebrate</td>
<td>51%</td>
</tr>
<tr>
<td>To be more outgoing</td>
<td>34%</td>
</tr>
<tr>
<td>To get drunk</td>
<td>28%</td>
</tr>
<tr>
<td>To feel happy</td>
<td>28%</td>
</tr>
</tbody>
</table>

In
fact, more seniors than freshmen reported drinking 5+ drinks in the last 2 weeks. Reported consequences in this group were also higher relative to other groups (Table 5).

### Table 5. High-risk Drinking and Reported Consequences

<table>
<thead>
<tr>
<th>Core Survey, Spring 2012</th>
<th>Freshmen</th>
<th>Sophomores</th>
<th>Juniors</th>
<th>Seniors</th>
</tr>
</thead>
<tbody>
<tr>
<td>% of students in classification who…..</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>drank 5+ in last 2 weeks</td>
<td>49.2%</td>
<td>49.2%</td>
<td>47.8%</td>
<td>56.8%</td>
</tr>
<tr>
<td>Reported consequences related to alcohol or drug use in last year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Argument or fight 1+ times</td>
<td>30.9%</td>
<td>38.7%</td>
<td>32.1%</td>
<td>42.9%</td>
</tr>
<tr>
<td>driven under the influence 1+ times</td>
<td><strong>12.8%</strong></td>
<td><strong>25%</strong></td>
<td><strong>26.5%</strong></td>
<td><strong>36.4%</strong></td>
</tr>
<tr>
<td>had memory loss 1+ times</td>
<td>37.9%</td>
<td>38.8%</td>
<td>34.6%</td>
<td>41.9%</td>
</tr>
<tr>
<td>been taken advantage sexually</td>
<td>7.4%</td>
<td>9.9%</td>
<td>7.1%</td>
<td>7.1%</td>
</tr>
<tr>
<td>been hurt or injured</td>
<td>13.6%</td>
<td>16.6%</td>
<td>13.1%</td>
<td>13.6%</td>
</tr>
</tbody>
</table>

Interestingly, Core and NCHA results generally indicate the percentage of students reporting alcohol use negatively impacted academic performance is lower than what might be expected. In 2013, NCHA results indicate only about 1/5 of students attributed poor academics to their alcohol use. From discussions with students on this topic, academic issues are the result of not studying enough or completing assignments prior to the social outing, not alcohol use, per se. Yet, the literature on this topic is clear. Academic goals are compromised when they engage in high risk drinking behaviors. Students are harmed and bring harm to others when they drink.\(^8\) Greater efforts to address this misperception will be made.

A final point relates to the use of drugs other than alcohol. Concerted attention is given to alcohol because the percentage of students who use this drug is greater than other types of drug use and it is more visible to the community, on and off campus. However, the use of other illicit drugs is also of concern, most particularly, marijuana and the illicit use of prescribed drug (Table 6). Although marijuana use has remained relatively consistent over the years, it is the most frequently reported illicit drug, based

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on Core reports. Sanctions for marijuana use on campus have also increased in recent years, suggesting that the national debate may be impacting student behavior.

<table>
<thead>
<tr>
<th>TABLE 6. Illicit Drug Use, 2006-2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core Survey</td>
</tr>
<tr>
<td>Undergraduate Populations</td>
</tr>
<tr>
<td>Marijuana use in the past year (annual prevalence)</td>
</tr>
<tr>
<td>Current marijuana users (30-day prevalence)</td>
</tr>
<tr>
<td>Illegal drug use other than marijuana in the past year (annual prevalence)</td>
</tr>
<tr>
<td>Current users of illegal drugs other than marijuana (30-day prevalence)</td>
</tr>
</tbody>
</table>

With respect to the illicit use of prescription drugs, a nationwide problem that has been reported by students and administrators alike, 2013 NCHA data indicated the most popular drugs reported to be used by TU students are stimulants (9.9%), pain killers (6.7%) and sedatives (4.4%). As noted above, amphetamines are the second most reported illicit drug by undergraduates. In discussing this issue with students, students believe amphetamine use is high on campus although less than 10 percent actually use illegally. However, they also perceive that the University “looks the other way” in part because amphetamines “help” student to succeed. They note the discrepancy in the attention given to alcohol, believing that illicit use of prescription drugs is a more serious issue. More visible programming must occur to encourage discussion, share information and address misperceptions to better address this issue.

NEXT STEPS

AlcoholEdu reports show that substantial percentages of students, after completing the online program, learn and reflect on their behaviors, suggesting the importance of continued reinforcement of educational information and providing skill-
building sessions to help students meet intentions when engaged in social events that may include alcohol. Eighty five percent (85%) in 2012 responded that AlcoholEdu prepared them to help a friend who may be in danger from an alcohol overdose. For 87%, the course provided information to establish a plan for making responsible decisions when drinking. They plan to use protective behaviors when drinking, suggesting a desire to use information to reduce harm, a point reinforced by NCHA results that show more students report using these behaviors. In addition, 68% of freshmen who completed Survey 2 in AlcoholEdu indicated they were stimulated to reflect on their attitudes and behaviors as well as change their perceptions about others’ drinking behaviors. It is our intent to support these students through enhancements in programming that will reinforce information, encourage open discussion and support student decisions not to drink. We should also explore an expansion of screening and use of BASICS as a tool to help students reflect on their behavior to avoid consequences.

Engaging students in educational experiences to provide and reinforce information, also encourage students to discuss their views in open venues. Students have the opportunity to think critically about the problem and their own behaviors. We have made progress but more work is needed. We must maintain and enhance educational and enforcement efforts in the community, working with other organizations to decrease access and promote responsible retailing. More discussions with community law enforcement and owners/managers of apartment complexes are needed to identify strategies to reduce pre-partying activities off-campus. Educational programming must continue to place an emphasis on the risks associated with raising blood alcohol concentration in a short period of time, particularly when engaging in behaviors like “doing shots” and pre-gaming. We need to support students who indicate a “readiness to change” after completing AlcoholEdu, and give voice to those who choose not to drink. Importantly, other illicit drug use must also be given attention to address misperceptions and reduce associated risks.
For its part, SECC plans to continue to coordinate the resources and programs directed towards alcohol and drug education but become more strategic in how it addresses problems associated with alcohol/drug use, using data derived from multiple sources and bringing in staff, students and faculty into discussions as needed to inform policy and programs. As a group, we have discussed the importance of reinforcing information students receive in their pre-college years as well as that which is presented via AlcoholEdu. We cannot expect to implement single programs and hope that exposure to the information will lead to behavior change. Students must understand their risk. Their use of alcohol with other drugs, prescribed or otherwise, puts them at greater risk for more serious health problems. Students have greater exposure to AOD information, compared to those in the past. They question messages that emphasize danger if their own experiences and those reinforced by peers suggest we are “panicking without cause,” as some students have told us. As an institution we need to continue to listen to students in order to understand the factors that contribute to the problem. We need to assure that our messages stay consistent, enforcement remains stringent, collaborations are fine-tuned and education/prevention programs reinforce key information students need to think critically about their AOD use. AOD objectives for the upcoming semester are outlined below.

**SECC GOALS for 2013-2014:**

4. To improve the health and safety of the student population around alcohol
   - To help students make responsible choices around drinking alcohol
5. To create culture change with regard to how students drink
6. To develop a consistent method of evaluating progress in meeting first two goals

**Goal 1 OBJECTIVES—Health & Safety:**

- Maintain clear behavioral expectations for students, specifically around enforcing laws and policies and maintaining personal safety around alcohol use;
- Enhance communication to students, particularly entering freshmen, to assure behavioral expectations are understood;
Maintain current programmatic efforts, including students in the development of policies and programs;
  - Address misperceptions regarding current behavior around drinking and alcohol use/abuse via stronger, more visible social norming campaign;
  - Address misperceptions regarding current behavior around illicit drug use via social norming/marketing;

- Explore next steps with Greek Life for addressing high-risk drinking;
- Engage students in efforts to better understand specific high-risk drinking behaviors (e.g. pre-gaming) and develop educational programming to lower the rate of dangerous drinking practices;
- Identify (and adopt as appropriate) new, innovative programming, preferably with demonstrated effectiveness, that will address underlying factors that lead to AOD use;
- Continue to use of student peers (e.g. RA’s, OL’s, Student Ambassadors, Alcohol and Drug Peer Educators, Student Government leaders, etc.) to have meaningful discussions around alcohol use and its effects with students with whom they have contact in their prescribed roles;
- Explore the possibility of adopting a pilot alcohol screening program, targeting specific subpopulations;
- Enhance marketing of Responsible Tiger Protocol and incorporate in bystander intervention strategies that will help students to develop skills necessary to reduce harm to peers.

Goal 2 OBJECTIVES – Campus Culture:

- Continue environmental management strategies to decrease access to and availability of drinking, and diminish the “glorification” of drinking through contacts with such groups as community coalitions, liquor stores and retailers, tobacco merchants and those selling tobacco products (both smoked and smokeless).
- Create more campus and late night activities, using the types of activities that students enjoy (i.e., music events, fitness classes, “cool” places to hang out, etc.) to give students social choices that support healthier and safer experiences as well as promote social engagement.
- Improve communication with Academic Affairs around planned TU events that involve drinking/partying to insure students continue to attend classes and maintain satisfactory academic progress.
• Educate the university community (faculty, staff and students) about student patterns of drinking, factors that contribute to high-risk drinking and associated consequences.

• Begin discussions to include a parent handbook, modified from that which was developed by University of Pennsylvania researchers, and disseminate to parents to raise awareness among parents and encourage continuing conversations with their student about risk-taking behaviors.

• Promote a campus culture that fosters a holistic view of health and wellness, encourages students to adopt positive, healthy behaviors and supports skill development and student self-efficacy to sustain these behaviors.

• Maintain cross-college/university communication with other (local) higher education institutions around events involving alcohol and partying in order to better manage the events and subsequent fall-out problems associated with these events.

• Maintain involvement with Maryland Collaborative to share information and learn about evidence-based strategies that may enhanced current programmatic responses to underage and high-risk drinking.

Goal 3 OBJECTIVES—Measuring Progress:

• Use baseline data for alcohol transports and work toward a specific target reduction of transports (especially during peak consumption times); objective would be to realize an X% reduction in transports due to alcohol (mis)use.

• Use Core and NCHA data to develop education/prevention programs addressing marijuana and prescription drugs to mitigate the effects and consequences of student use and abuse.

• Continue to monitor the number of per capita violations for the following: possession/use of alcohol, public intoxication, possession/use of False ID’s, off-campus disorderly behavior.
  
  o Identify cases of recidivism, efforts at intervention and student success.
  o Track how many students use the Responsible Tiger Protocol and when they are likely to use;

• Monitor referrals to BASICS, evaluating its effectiveness in addressing low level alcohol violations.

• Establish routine method for reporting the Committee’s successes to upper administration, faculty/staff and students with alcohol and drug programming.