

**Biennial Review of the Trinity University
Alcohol and Other Drug Prevention Program
for Academic Years 2004-2005 and 2005-2006**

October, 2006

Preface

In compliance with the Drug-Free Schools and Communities Act, President John Brazil appointed a committee to conduct a biennial review of Trinity's alcohol and other drug prevention program. The committee met to produce this report. Committee members were:

- Dr. Duane Coltharp, Associate Vice President for Academic Affairs
- Mr. Rudolph Gonzalez, Director of Campus Security
- Ms. Pamela Johnston, Director of Human Resources
- Dr. Richard Reams, Assistant Director, Counseling Services
- Dr. Diane Saphire, Director of Institutional Research and Associate Vice President for Information Resources (*chair*)
- Dr. Edward Schumacher, Associate Professor of Health Care Administration
- Mr. David Tuttle, Dean of Students and Director of Residential Life

By law this document must be made available to the public upon request. It must be retained for three years after the fiscal year in which it was created.

For more information about Trinity University's response to the use and abuse of alcohol and other drugs among students and employees, you may contact:

- Mr. Rudolph Gonzalez, Director of Campus Safety, (210) 999-8310
- Ms. Pamela Johnston, Director of Human Resources, (210) 999-7507
- Dr. Gary Neal, Director of Counseling and Health Services, (210) 999-7411
- Mr. David Tuttle, Dean of Students and Director of Residential Life, (210) 999-8843

Introduction

The committee charged with reviewing Trinity University's alcohol and other drug prevention program feels an obligation to do more than simply assure that Trinity's program met the minimal legal requirements. Part of the University's mission states:

Trinity University is dedicated to creating a superior intellectual environment by: recruiting, developing and retaining outstanding faculty members dedicated to teaching, to scholarship and creative endeavor, and to service to the University and its community; identifying, and attracting talented and highly motivated students to its predominantly full-time, residential student body; and providing a supportive and challenging experience wherein students, faculty, and staff can realize the potential of their abilities and engage their responsibilities to others.

To best achieve the goal of liberal education and the exercise of our responsibilities to society, Trinity strives to educate the University community about effects of illicit drugs and alcohol. It is our conviction that this knowledge can contribute to a more responsible approach to drugs and alcohol and to a healthier and happier life.

The committee has examined Trinity's compliance with the Drug-Free Schools and Communities Act, and has made some recommendations (see page 11) for assuring our continued compliance. We have also included in this document a summary of the larger efforts within the entire University community to assist all students and employees to develop an informed and responsible approach to alcohol and other drugs.

Documents Describing the University Policies

Trinity's philosophy, policies, procedures, and resources are prominently displayed on the alcohol web page at http://www.trinity.edu/departments/student_affairs/alcohol/index.htm.

To describe our policies regarding the use of illicit drugs and alcohol, Trinity University annually distributes two different documents, one to students, and one to employees. These documents are included in Appendices II and IV.

The committee reviewed both documents and verified that they contain the following items as described in the Drug-Free Schools and Communities Act:

- Standards of conduct that clearly prohibit, at a minimum, the unlawful possession, use or distribution of illicit drugs and alcohol by students and employees on its property or as part of any of its activities.
- A description of the applicable legal sanctions under local, State or Federal law for the unlawful possession or distribution of illicit drugs and alcohol.
- A description of the health risks associated with the use of illicit drugs and the abuse of alcohol.

- A description of any drug or alcohol counseling, treatment, or rehabilitation or re-entry programs that are available to employees or students.
- A clear statement that the institution will impose disciplinary sanctions on students and employees (consistent with local, State and Federal law), and a description of those sanctions, up to and including expulsion or termination of employment and referral for prosecution, for violations of the standards of conduct.

In addition to the two documents described above, Trinity also publicizes our drug and alcohol policies in other places. The student document also appears in each year's Student Handbook. The employee document also appears in the Personnel Policy Manual for Classified Employees. Additionally, the Drug and Alcohol Abuse Policy is posted on the Trinity University website under Fiscal Affairs Policies and Procedures (http://www.trinity.edu/departments/fiscal_affairs/fapolicy/general/drgabuse.htm). The Faculty and Contract Staff Handbook (online document, available at http://www.trinity.edu/departments/academic_affairs/hb/index.htm) includes links to both the Drug and Alcohol Abuse Policy and the alcohol web page (http://www.trinity.edu/departments/student_affairs/alcohol/index.htm).

To further enhance our policies, processes, and documentation, the employee document was sent to the university's labor attorneys this summer for review; final outcome of that review is still pending.

Distribution of Documents

For students, university policy states that since all Trinity University students are supplied an e-mail address that "Email is an official means of communication and will be utilized to conduct business and supply information to students, staff and faculty." Each year, the University electronically sends the information on illicit drugs and alcohol policies to all students. A copy of the email messages to students for 2004 and 2005 is found in Appendix I and a copy of the student policy is found in Appendix II.

In reviewing this electronic dissemination process, the committee has discovered that the distribution list being used ("Trinity Students") includes all undergraduate students but does not include the graduate students. We recommend that in the future, the Dean of Students also distribute the email message to the graduate student distribution list ("Trinity Graduates").

To assure that all of our employees are informed annually about our alcohol and other drug prevention program, The Vice President for Fiscal Affairs sends a message each fall, by email, including an attachment containing the required information, to all employees who have Trinity University email addresses. The few who do not have email addresses were sent a paper copy of the material. A copy of the information sent can be found in Appendix III., and the policies can be found in Appendix IV.

Enforcing of Sanctions

The student discipline system for violations of the drug and alcohol policy involves several Student Affairs offices and the Student Conduct Board. The professional Residential Life Staff handles relatively simple cases of first offense alcohol possession originating in the residence halls unless the accused student wishes to take the case to Student Conduct Board. Such cases, and cases involving multiple charges or repeat offenses, are referred to Student Conduct Board. The Dean of Students handles cases involving felonious behavior, off-campus incidents, and/or violations by student organizations as well as cases adjudicated when Student Conduct Board is not in session.

The Department of Campus Security works closely with the Dean of Students to provide a safe and secure campus. When campus peace officers detect criminal activities of a serious nature on campus, an arrest is made. For most minor offenses, such as possession of alcohol by a minor, the individuals are turned over to the Dean of Students and the Student Conduct Board. These offenses are still counted as arrests for statistical purposes as required by the Jeanne Clery Act (formerly known as the Campus Security Act).

The following statistics, provided in compliance with the Crime Awareness and Campus Security Act of 1990, are calculated on a calendar year basis and include referrals/arrests that occurred on the Trinity University campus and on property owned/controlled by the university.

Number of Arrests or Referrals for Specific Violations & Offenses

OFFENSE	2003	2004	2005
LIQUOR LAW OFFENSES			
Liquor Law Arrests by DCS	0	0	0
Liquor Law Violations Referred by DCS	39	21	14
<i>Occurred in Residence Halls</i>	<i>32</i>	<i>12</i>	<i>11</i>
<i>Occurred in Non-Residence Halls</i>	<i>7</i>	<i>9</i>	<i>3</i>
Liquor Law Violations Referred By Res Life for Disciplinary Action	330	207	309
DRUG LAW OFFENSES			
Drug Abuse Arrests by DCS	0	0	0
Drug Abuse Violations Referred by DCS	15	8	14
<i>Occurred in Residence Halls</i>	<i>15</i>	<i>8</i>	<i>12</i>
<i>Occurred in Non-Residence Halls</i>	<i>0</i>	<i>0</i>	<i>2</i>
Drug Abuse Violations Referred by Res Life for Disciplinary Action	22	26	43
Notes:			

Liquor & Drug Law violations referred by DCS – may also be reflected in Liquor & Drug Law violations referred by Residential Life

The Campus Security and Residential Life staff has maintained consistent standards of enforcement of the alcohol policy for well over a decade. A tenet of the University's approach to alcohol is that we will enforce policy. Indeed, staff members are instructed that they are not permitted to give warnings when they see alcohol or violations involving containers. This has inflated our number of incidents because many times those who are referred to Conduct Board are determined to be not responsible for violations because they were roommates of violators or simply present when a violation occurred. Generally between 50 and 65% of respondents are found responsible.

The only trend we can identify is that there are usually more incidents in the fall than in the spring. In two of the last three years there have been a substantial number of cases. There is no evidence that the policy or enforcement has been different, so we attribute the unevenness to the idiosyncrasies of each class.

Only one suspected drug-related incident involving an employee has been reported to Human Resources over the past two years. Appropriate disciplinary action was taken.

Spring 2005 Health Behaviors Survey

Between January 31 and February 11 of 2005, professors administered the 2005 Health Behaviors Survey in 29 randomly selected classes. The sample of TU undergraduates (308 women, 190 men) was representative of the undergraduate population: the class representation was 22%-27% for each class for each sex. Additionally, our in-class method of collecting completed surveys resulted in a high response rate. Researchers Dr. Richard Reams and Dr. Diane Saphire presented comparative Greek vs. non-Greek data to the Greek Council during spring semester of 2005. They also wrote and distributed a report, "Academically-related Results from the 2005 Health Behaviors Survey," to all faculty during September 2006 (see Appendix V).

Dr. Reams has prepared a summary of longitudinal findings from surveys administered during comparable two-week periods of early spring semesters for 2000, 2001 and 2002 as well as 2005 (see Appendix VI). A review of the findings reveals that prevalence of use has dropped for some substances (e.g., stimulants, sedatives, inhalants, and smoked tobacco) and remained relatively steady for others; there has been no increase in prevalence for any substance.

The 2005 survey was the first to inquire about the use of prescription medications (i.e. anti-anxiety, anti-depressant, ADD, and pain-killing medications) that had not been prescribed to the user. The non-prescribed use of ADD medications was the most common at 12.3%. Future surveys should continue to track the misuse of prescription medications. Indeed, future surveys should assess not merely prevalence of use (which may be one time for some users), but frequency of use.

Regarding alcohol use and its consequences, a review of the longitudinal data indicates stability across the five-year period, with one positive exception: the percentage of

students (including non-drinkers) who did *not* drink with the goal of getting drunk during the fall semester preceding the survey increased from 27% for fall 1999 to 35% for fall 2004. The percentage of students who reported experiencing each of seven negative consequences of drinking at least once during the fall semester preceding the survey remained fairly stable across the five-year period. Unfortunately, the survey items assessing the prevalence of these negative consequences of drinking simply inquired about their presence or absence. Thus, it is possible that the frequency of negative consequences is dropping or increasing while the percentage of students who experience negative consequences remains stable. Therefore, future surveys should assess not merely prevalence of each negative consequence, but frequency.

Ongoing Efforts

In addition to providing information describing our alcohol and other drug policies and consistently enforcing the disciplinary sanctions, Trinity University strives in many ways to educate the University community about alcohol and other drugs and raise awareness of their potential dangers. The University also offers intervention efforts with individuals who are abusing or are at risk of abusing alcohol or other drugs.

The Trinity Alcohol Coalition was formed in order to coordinate campus resources and messages related to alcohol at Trinity University. Since its inception, first as a Task Force, then as a standing coalition, this group of faculty, staff, and students has met to discuss an array of issues.

The Coalition has done a complete revision of the Trinity alcohol policy and subsequent revisions related to other topics, such as student usage off campus and with University employees. In addition, the group heard a proposal and recommended use of the population level on-line Alcohol Wise course for all incoming students. In addition, the group has advised Dr. Richard Reams, Assistant Director of Counseling Services, on surveys and data, and discussed at length the issues related to the implementation of a safe ride program for students.

Following is a description of efforts for education and intervention during the 2004-2005 and 2005-2006 academic years.

For Employees

- In January 2004, Trinity implemented an Employee Assistance Program at no cost to our employees (100% of the premium is paid by the University). The EAP is available to all benefits-eligible employees and family members and (among many other items) offers resources and assistance for alcohol and drug related issues/problems. In addition to an Education and Resource Center, the EAP provides 24-hour telephonic consultation, up to three face-to-face counseling sessions per issue, and online coaching and health management options.

For Students

- Alcohol 101. Nearly all first year students have been introduced to alcohol issues for the 2004-2005 and 2005-2006 years through Alcohol 101. The University of Illinois and the Century Council created this interactive CD-ROM program. All Mentors guide their first year Mentor groups through this program in the early fall. Most Trinity University students have gone through this popular program.
- Alcohol.edu is a web-based education course designed as a sanction for those who have been found responsible for violating the alcohol policy.
- Alcohol information brochure. This brochure was developed for Admissions counselors to have available when traveling to be able to consistently answer questions about the University's philosophy related to alcohol. The brochure is due for an update in the spring of 2007. The information contained within is primarily the same as that contained on the Trinity Alcohol web page.
- Alcohol Poisoning Wallet Card. The wallet card includes signs of alcohol poisoning and a recommended procedure for responding when another person appears to be in danger. The cards are distributed to first year students during New Student Orientation and to students through Greek clubs. They are also provided to RAs.
- Alcohol/Rape Wallet Card. One side of the card briefly summarizes campus policy and Texas laws regarding alcohol as well as providing a social norms message. The card is distributed to first year students during New Student Orientation.
- Alcohol Use Consultations. A psychologist at Counseling Services provides confidential assessment and feedback to students. Most of them are referred by the Student Conduct Board [previously called Student Court] following their second violation of the University's alcohol policy. Some seek a consultation on their own initiative.
- Alcohol Web Page. Linked to the Campus Life section of Trinity's web page, multiple resources are included for education, assessment, and assistance. http://www.trinity.edu/departments/student_affairs/alcohol/index.htm
- Alcohol Wise. In 2006 all incoming first year students were required to complete the web-based Alcohol Wise course before being permitted to register for classes. Students took a follow-up test and then participated in one of a variety of programs with the Resident Mentors.

- Brochures. Counseling Services and Health Services provide brochures within their offices and also make them available periodically at other locations on campus via special displays, bulletin boards, etc.
- E-Chug (Electronic Check-Up to Go). This online instrument provides a drinking profile and feedback. It is linked to the Student Affairs and Counseling Services web pages and is promoted through the campus newspaper, the daily online newsletter *LeeRoy*, the bimonthly Student Affairs newsletter *TigerBytes*, and banners in the dining hall.
- Fitness Fair. Each fair includes tables staffed by representatives from Mothers Against Drunk Driving and the San Antonio Council on Alcohol and Drug Abuse.
- Great American Smoke-out. Health Services promotes this annual event.
- Information to Parents. Incoming first year students are sent brochures in the summer that contain information about alcohol use and abuse. The Residential Life Office hopes that parents and students will review this material together before students move to campus. Parents have received information related to alcohol through the *Trinity Parent* newsletter and the *Trinitonian* newspaper.
- Parental Notification. Following two alcohol violations or one drug violation, students are required to have their parents contact the Dean of Students. Working in partnership with parents to help these students has been extremely successful. Because an additional alcohol or drug violation may result in suspension it is critical that parents understand the precarious position in which students place themselves.
- Resident Mentor Programs. A new position called "Resident Mentor" has been created in the Residential Life Office. This position has led to 22 staff members who have provided extended transitional programming for first year students. The series of programs includes one specific to alcohol use. In 2004 and 2005 the staff sponsored a "Party House" educational program for all first year students.
- Responsible Party Guidelines. The Greek Council, with support from the Alcohol Task Force, has developed voluntary guidelines for unofficial, non-University-related, off-campus parties. These guidelines provide a blueprint for social clubs to create a safe and controlled party environment. (Replaced by Risk Management Guidelines in 2006.)
- Risk Management Guidelines. These were adapted to apply institutional guidance and relevance to the former Responsible Party Guidelines. The guidelines are available at http://www.trinity.edu/departments/fiscal_affairs/fapolicy/general/alchlcmp.htm.
- Tiger Rides. Students continue to pursue safe-ride options. The University has made several attempts to partner with Safe Rides, a national company that issues

debit cards to students. The company has been unresponsive. The students are not deterred and are exploring a safe ride option with a local cab company.

- Tigers' Den Pub. While it may seem counter-intuitive, in 2003 the Trinity campus re-opened its campus pub. The pub was opened to create a social space on campus for members of the University community to gather where those of legal drinking age can consume alcohol safely and in compliance with the University's policy guidelines. The Trinity Alcohol Coalition supported the opening of the pub as a venue where responsible, legal drinking can occur. The Coalition believes that the pub provides a venue for modeling responsible alcohol consumption while countering the common misperception among students that the administration is "anti-alcohol," a misperception that harms other efforts to address drinking issues.
- Trinity Alcohol Coalition: In 2002-2003 the Alcohol Task Force successfully revised the alcohol policy. The Task Force felt that its work was not complete and was granted on-going status as a Coalition. In 2003-2004 the Coalition turned its attention to reviewing the new policy and suggesting adjustments for 2004-2005. In 2005-2006 the Coalition approved a new section to the policy that provided guidelines for faculty and staff use of alcohol with students. In addition, the Coalition made important recommendations regarding the campus pub, Greek policies, social norms information, and alcohol violation sanctions. The Coalition is made up of faculty, staff, and students representing a cross-section of the campus.
- 21st Birthday Greeting. The Vice President for Student Affairs sends a birthday greeting to students turning 21 that includes a caution about excessive drinking.

A look ahead

The Alcohol Wise web-based course has just been instituted this fall. Follow up on this effort is forthcoming.

The new Risk Management Guidelines described above have just gone into effect. We will be monitoring the effects of this change.

This year the Alcohol Commission is considering recommending campus speakers on the topic of alcohol, reviewing our philosophy on alcohol, tightening up the policy (which has expanded since it was revised three years ago), and continuing to explore a safe ride voucher program with a cab company in town.

Follow Up on Recommendations from 2004 Report

In 2004 the committee made the recommendations below. Here we indicate how those recommendations have been addressed.

- Human Resources should assure that the required information is distributed to all employees annually.
 - This has been done as explained on page 3 and in appendix III.
- Counseling Services and Institutional Research should conduct another follow-up to the alcohol surveys that were done in the past to assess changes since the last survey.
 - This was done in the spring of 2005 as described on page 5. Selected results of the survey are included in Appendices V and VI.
- The documents sent annually to faculty and staff should be reviewed and revised as needed.
 - These documents were sent to the university's labor attorneys this summer for review; final outcome of that review is still pending.
- The policy pertaining to alcohol consumption at events involving students and either faculty or staff members should be reviewed and revised as needed. The revised policy should be appropriately communicated to the campus community.
 - In 2005-2006 the Trinity Alcohol Coalition approved a new section to the policy that provided guidelines for faculty and staff use of alcohol with students. This policy may be found at:
http://www.trinity.edu/departments/fiscal_affairs/fapolicy/general/alchlemp.htm.
Suggestions and feedback were solicited by campus-wide email.
- A new alcohol and other drug website should be created. We understand that this is already in progress.
 - A page focusing on alcohol has been created. Linked to the Campus Life section of Trinity's web page, multiple resources are included for education, assessment, and assistance.
http://www.trinity.edu/departments/student_affairs/alcohol/index.htm
- We support the recently created position for an Alcohol Coalition intern and recommend its continuation.
 - This intern successfully completed the development and implementation of the alcohol web page:
http://www.trinity.edu/departments/student_affairs/alcohol/index.htm
- A campus-wide educational campaign should be conducted. We understand that this is already in the planning stages.
 - A number of separate, targeted efforts have been undertaken as described above. While these were not a campus-wide campaign, given the resources available it was determined that targeted efforts would be a better use of those resources.

Recommendations

After having compiled and carefully reviewed the material in this report, the committee makes the following recommendations:

- The committee recommends that the electronic distribution of the student documents include the graduate student distribution list (“Trinity Graduates”) in addition to the undergraduate distribution list (“Trinity Students”).
- The committee recommends that the university investigate the possibility of hiring a health educator. This person would hold appropriate qualifications to be able to work not only in educating the community about alcohol, but other health issues including drugs other than alcohol. This investigation might start with some formal benchmarking research to determine whether other institutions similar to Trinity have such positions.
- In order for the committee to better accomplish its task of determining the effectiveness of Trinity’s drug prevention program, it would be useful if the university had more specific goals. We recommend that Student Affairs, through or with input from the Alcohol Coalition, articulate goals for its programs and also that Human Resources articulate goals for its program. We further recommend that both areas develop methods of assessing attainment of those goals.
- The committee recommends the continued administration of the Health Behaviors survey on a biennial basis. Dr. Reams may wish to consider revising some items (e.g., negative consequences of drinking) to assess frequency, not merely presence or absence.
- The committee recommends that Dr. Reams work to gather data regarding the frequency and prevalence of the non-prescribed use of prescription medications so as to develop a better understanding of this issue at Trinity.

APPENDIX I 2004 and 2005 Emails to Students

2004

Dear Students,

Your success as a student and well-being as a person are of great importance to all of us at Trinity University. The misuse/illegal use of alcohol and the use of illicit drugs can create negative academic, social, legal, psychological, emotional, and health-related consequences.

In compliance with the Drug-Free Schools and Communities Act, I am sending information (below) related to drugs and alcohol to all students. I invite you to learn even more, though, about the Trinity University philosophy on alcohol, assessment resources, and educational information by reviewing the attached (new) web-page. Thank you to senior Leslie Elsaifi for her development of this page, Dr. Richard Reams, for sharing his resources, and the Trinity Alcohol Coalition for their work and thoughtful input.

<http://www.trinity.edu/departments/student%5Faffairs/alcohol/>

Knowledge about the potential negative effects of alcohol and other drugs can encourage you to make choices that will positively contribute to your education and well-being. If you have any questions about this material, please contact me.

Drugs

Trinity University prohibits the use, possession, manufacture, sale or distribution by its students of any illegal drug (or drugs) in any amount or paraphernalia, regardless of location. Similarly, any act that results in another person involuntarily or unknowingly consuming any illegal drug (or drugs) is prohibited.

A drug is considered a medicine when it is used to treat an injury, symptom, or illness. In everyday use, “medicine” refers to legally prescribed and over-the-counter preparations, whereas “drug” is most often used to categorize illegal or illicit substances that change an individual’s body functions, feelings, mental state, or behavior. Psychoactive (mood-altering) drugs primarily change emotions and behavior through their effect on the central nervous system. All psychoactive drugs, prescribed or illicit, can be abused and harm the user. Addiction can occur with psychoactive drugs as well as medicine.

When more than one drug (including alcohol) is used at the same time, there can be an interaction between the drugs, and the effects of each drug may be altered. Tolerance and physical or psychological dependence are other factors that influence the development of addiction and accompanying physical and psychological complications from repeated drug use.

The use of illicit drug use can create problems in the physical, emotional, economic, or interpersonal aspects of life. Absence from classes or work and academic underachievement are among the risks. Additionally, illicit drug users are at high risk for HIV infection and other sexually transmitted diseases. Approximately 60% of all deaths that are related to drug abuse result from an overdose. Infections, including AIDS, account for 10% of the deaths and the remaining 30% are caused by some form of violence linked to drug abuse.

Federal law prohibits the use, possession, sale, distribution, manufacture, or use of any illicit drug. Conviction for violation of a drug law will result in a minimum suspension of one semester from Trinity

University, fines, and a possible jail sentence. Additionally, a conviction can severely restrict a student's career opportunities.

The University offers counseling and referrals for treatment of drug abuse. These services are offered by Counseling Services on a confidential basis to members of the University community who seek such assistance.

Sanctions

Please be aware that the following guidelines have been endorsed by the Trinity University Alcohol Coalition (a group of students, faculty, and staff), the Student Court, and the Student Affairs Office, and will usually be imposed upon students who are found responsible for violating policies. (The Student Court and the Student Affairs staff have discretion to adjust sanctions in consideration of specific situations.)

- **First drug violation**

- General probation; suspension, when the violation is sufficiently serious, or when the drug infraction is coupled with other simultaneous violations of policy including, but not limited to hosting, parties, disorderly conduct, or excessive noise

- Parental notification

- **Second drug violation**

- Suspension or expulsion

- **Hosting**

- General probation for the time remaining at Trinity University (any violation while on general probation may result in suspension)

- Parental notification

(The policies document included here as Appendix II was appended to this email.)

2005

Dear Students,

Surely you've heard the questions:

Why isn't hard alcohol permitted on campus?

Hard alcohol can be more dangerous than beer and wine. Whereas a person can rapidly consume a large number of shots in an hour and experience alcohol poisoning, it is less likely that a person can physically consume the same number of beers or glasses of wine at the same rate. Almost all cases of Trinity student alcohol poisoning are related to hard alcohol.

Isn't having a pub on campus inconsistent with the alcohol policy?

The University is not anti-alcohol. The Tigers' Den provides an environment for the responsible, lawful use of alcohol. The Tigers' Den is a social space (that happens to serve alcohol) designed to bring the community – students, faculty, and staff – together in an environment that accommodates both drinkers, of legal age, and non-drinkers of all ages. Patrons who are intoxicated will not be served, consistent with the University's commitment to promoting the responsible and legal use of alcohol among those who choose to drink.

By enforcing policy on campus isn't the University forcing students to drink off campus and be placed in dangerous drinking and driving situations?

No. Trinity University recognizes that each student bears responsibility for his or her voluntary choice to drink in any setting. The University is greatly concerned that some students might drive while under the influence of alcohol or accept a ride with the person "least drunk" within a group. Through the Trinity Alcohol Coalition, the University will work to educate students about these dangers and will continue to offer social opportunities for students on campus.

Why enforce policy if a drinker isn't bothering anyone?

It is difficult to fairly pick and choose when and when not to enforce the alcohol policy on campus. The University chooses to enforce the policy consistently and views this as the fairest approach. In reality, most students draw attention to themselves when they are consuming alcohol and this leads to the majority of conduct referrals.

Why are parents notified about violations?

Quite simply, it works. Parental notification has proven to be extremely effective in curbing problem drinking behavior. Upon a second violation the University makes parents aware of their student's status, asking parents to reinforce the importance of sound decision-making with their students. Because the third offense usually leads to suspension, parents have been very grateful to be informed and have been strong partners in dealing with student conduct.

What is the responsible friend policy?

The policy is set-up for the safety of our students. If students are worried about the health and safety of a student who has had too much to drink and contacts a helping person on staff, that student and the student with the person will not be referred for judicial action. Don't hesitate because you don't want to get in trouble. We'd gladly prefer to simultaneously save a life and have one less judicial case.

Your success as a student and well-being as a person are of great importance to all of us at Trinity University. The misuse/illegal use of alcohol and the use of illicit drugs can create negative academic, social, legal, psychological, emotional, and health-related consequences.

In compliance with the Drug-Free Schools and Communities Act, I am sending information related to drugs and alcohol to all students. I invite you to learn about the Trinity University philosophy on alcohol, assessment resources, and educational information by reviewing the attached web-page.

<http://www.trinity.edu/departments/student%5Faffairs/alcohol/>

The Trinity Alcohol Coalition has identified three common elements of the University's philosophy on alcohol: First, the University acknowledges that students will drink, regardless of age. Second, the health and safety of our students is essential. And third, the University will enforce our policy, which in many ways mirrors the law.

Knowledge about the potential negative effects of alcohol and other drugs can encourage you to make choices that will positively contribute to your education and well-being. If you have any questions about this material or opinions about alcohol and drug issues on campus, please contact members of the Alcohol Coalition:

Drugs

Trinity University prohibits the use, possession, manufacture, sale or distribution by its students of any illegal drug (or drugs) in any amount or paraphernalia, regardless of location. Similarly, any act that results in another person involuntarily or unknowingly consuming any illegal drug (or drugs) is prohibited.

A drug is considered a medicine when it is used to treat an injury, symptom, or illness. In everyday use, "medicine" refers to legally prescribed and over-the-counter preparations, whereas "drug" is most often used to categorize illegal or illicit substances that change an individual's body functions, feelings, mental state, or behavior. Psychoactive (mood-altering) drugs primarily change emotions and behavior through their effect on the central nervous system. All psychoactive drugs, prescribed or illicit, can be abused and harm the user. Addiction can occur with psychoactive drugs as well as medicine.

When more than one drug (including alcohol) is used at the same time, there can be an interaction between the drugs, and the effects of each drug may be altered. Tolerance and physical or psychological dependence are other factors that influence the development of addiction and accompanying physical and psychological complications from repeated drug use.

The use of illicit drug use can create problems in the physical, emotional, economic, or interpersonal aspects of life. Absence from classes or work and academic underachievement are among the risks. Additionally, illicit drug users are at high risk for HIV infection and other sexually transmitted diseases. Approximately 60% of all deaths that are related to drug abuse result from an overdose. Infections, including AIDS, account for 10% of the deaths and the remaining 30% are caused by some form of violence linked to drug abuse.

Federal law prohibits the use, possession, sale, distribution, manufacture, or use of any illicit drug. Conviction for violation of a drug law will result in a minimum suspension of one semester from Trinity University, fines, and a possible jail sentence. Additionally, a conviction can severely restrict a student's career opportunities.

The University offers counseling and referrals for treatment of drug abuse. These services are offered by Counseling Services on a confidential basis to members of the University community who seek such assistance.

Drug Sanctions

Please be aware that the following guidelines have been endorsed by the Trinity University Alcohol Coalition (a group of students, faculty, and staff), the Student Court, and the Student Affairs Office, and will usually be imposed upon students who are found responsible for violating policies. (The Student Court and the Student Affairs staff have discretion to adjust sanctions in consideration of specific situations.)

- **First drug violation**
 - General probation; suspension, when the violation is sufficiently serious, or when the drug infraction is coupled with other simultaneous violations of policy including, but not limited to hosting, parties, disorderly conduct, or excessive noise
 - Parental notification
- **Second drug violation**
 - Suspension or expulsion
- **Hosting**
 - General probation for the time remaining at Trinity University (any violation while on general probation may result in suspension)
 - Parental notification

(The policies document included here as Appendix II was appended to this email.)

APPENDIX II Student Policies

Alcohol

I. INTRODUCTION

A. Philosophy Underlying Alcohol Policy

Trinity University values the *freedom* of those who live and work here to make our own choices, and it values the *education* that equips us to exercise that freedom responsibly. Choices regarding alcohol, in particular, are a matter of individual and community interest because poor decisions can negatively impact our personal health and our public environment. Trinity respects the choices of those who consume alcohol within reasonable, legal bounds, and those who avoid it altogether. However, because the consumption of alcohol can impair an individual's judgment and lead to devastating damage and loss, this policy aims to limit those negative consequences. It calls us to be mutually accountable for sustaining a positive, livable, learning environment on our campus. Finally, this policy intentionally promotes awareness regarding the physical, emotional, mental, and legal ramifications of alcohol misuse because *educated freedom* relies not only on rules but, most importantly, on informed thinking.

B. Objectives of the Alcohol Policy

1. To encourage students to obey the laws of Texas regarding the use, possession and consumption of alcohol;
2. To encourage students' responsibility for their behavior regarding the consumption of alcohol and while under its influence;
3. To establish appropriate disciplinary mechanisms and penalties for students and organizations that violate University Alcohol policies;
4. To encourage intervention, treatment and support for students who are at risk from the misuse of alcohol; and
5. To encourage programs that educate students concerning the responsible use of alcohol.

II. STATE AND UNIVERSITY STANDARDS

A. Summary of Texas State Law Regarding Alcohol

1. Minors and Alcohol

- a) The legal drinking age is 21, and it is illegal for a minor to possess, purchase, and attempt to purchase, or consume alcohol. A first offense results in an alcohol awareness course, community service, a 30-day suspension of driver's license, and up to a \$500 fine. Repeat offenses may result in automatic suspension of driver's license and up to a \$2000 fine and 180 days in jail. All penalties are assigned at the discretion of the judge.

- b) Possession of false identification results in up to a \$200 fine.
- c) Making alcohol available to a minor results in up to a \$4000 fine and/or one year in jail.
- d) A parent must appear in court for any alcohol charges filed against a minor under 21 years of age.

2. Driving While Intoxicated

- a) For anyone under 21, it is illegal to drive with any detectable Blood Alcohol Concentration (BAC). A first offense results in up to a \$500 fine, 40 community service hours, alcohol awareness course, and 60-day suspension of driver's license. All penalties are assigned at the discretion of the judge.
- b) The legal limit for intoxication is .08 BAC. However, drivers may be cited for impaired driving due to alcohol regardless of BAC. Refusal to take a blood or breath test to measure BAC can result in a 180-day driver's license suspension.
- c) A first offense results in up to a \$2000 fine, 180 days in jail and driver's license suspension up to one year. Repeat offenses may result in up to a \$10,000 fine, 10 years in penitentiary and 2 years driver's license suspension.

B. General University policies related to alcohol

- 1. On campus, only beer and wine are permitted, and only in designated residential areas by those of legal age. Beer and wine may be served in the Tigers' Den to any students, faculty, staff, and their guests of legal age. "Hard" alcohol is prohibited regardless of the age of the student.
- 2. Persons or organizations that furnish alcoholic beverages to underage students or visitors will be subject to Trinity adjudicative action and/or criminal prosecution for violation of state laws.
- 3. Any act that causes others to involuntarily or unknowingly consume alcohol is prohibited.
- 4. Public intoxication is prohibited.
- 5. Students who contact University officials or other helping professionals out of concern for their own or another student's health and safety will not be considered for alcohol policy violations for that specific incident. (Note that when hazing may have occurred, state law requires that such incidents be reported to law enforcement officials).
- 6. The Board of Campus Publications will have the authority to determine policy regarding alcohol advertising in the *Trinitonian*.

C. Regulations on Alcohol Use within the Residence Halls

1. To respect legal use: All students 21 years or older and their guests of legal age may only possess and consume beer and wine in any upperclass residence hall room where at least one of the assigned residents of the room is present and is of legal age. "Hard" alcohol is prohibited, regardless of the age of the student.
2. To respect those who are under the legal drinking age and/or choose not to consume alcohol:
 - a) No open containers of alcohol may be possessed or consumed in the following locations: balconies, corridors, public areas, and designated substance-free floors.
 - b) The possession or consumption of alcohol and the possession of alcohol containers (including kegs) are prohibited in all first year halls and all upperclass rooms where neither resident is of legal age.
 - c) Since "hard" alcohol is prohibited, empty "hard" alcohol containers, decorative or otherwise, are likewise prohibited in any residence hall location, regardless of the age of the student.
3. To expect responsibility among those who choose to consume alcoholic beverages:
 - a) No alcohol in the residence halls may be provided from common source containers, including but not limited to kegs.
 - b) Students who consume alcohol are accountable to University conduct policies, including but not limited to disorderly conduct, destruction of property, and excessive noise.
4. To promote mutual accountability for all students to abide by Texas law and University policy: Those who are present where there is alcohol may be found responsible for violation of University policy.

D. Regulations on University Authorized Use of Alcohol

1. On-campus events
 - a) In the Tigers' Den only, Trinity University organizations or groups (including departments, offices, and student organizations) may permit alcoholic beverages for those of legal age, even with underage persons present.
 - b) Groups meeting on the campus whose constituency is entirely 21 years of age or above may appeal to the Associate Vice President for Fiscal Affairs for permission to serve wine and/or beer at scheduled social events in on-campus locations other than the Tigers' Den only if that event has been scheduled following established procedures.
 - c) Off-campus organizations and individuals are not permitted to serve any alcoholic beverages on the University campus unless the event

is being catered by ARAMARK and permission to serve beer or wine has been received from the Associate Vice President for Fiscal Affairs.

d) Except for the Tigers' Den, there will be no place on the Trinity University campus where alcoholic beverages are sold.

2. Off-campus events

a) Trinity student organizations and groups may apply to the director of Coates University Center & Student Activities or designee for permission to hold an off-campus event at which alcoholic beverages are served to those of legal age, even with underage persons present.

b) An approved event must be held in a licensed business establishment accustomed to and organized for checking IDs for age as well as selling and controlling consumption of alcohol.

III. ENFORCEMENT, EDUCATION AND SERVICES

A. University Enforcement of the Alcohol Policy

1. Students are personally responsible for complying with state and local laws and the University Alcohol Policy. Trinity University respects students' privacy and autonomy, assumes that they will behave legally and responsibly, and will not closely monitor the activities of individual students or members of student organizations.

2. Resident Assistants and the Department of Campus Safety will respond to any observed Alcohol Policy violations and submit incident reports to the Dean of Students Office and/or Student Conduct Board.

3. Alcohol policy violations will be handled through normal campus conduct procedures as described in the Trinity University Joint Statement on Rights and Freedoms of Students. Sanctions may range from no action up to expulsion.

4. On an annual basis, the Trinity Alcohol Coalition will review the range of sanctions for Alcohol Policy violations.

B. The Effects of Alcohol Consumption

1. The University encourages students who drink to do so in moderation because risks to the health and safety of self and others increase as Blood Alcohol Concentration (BAC) increases. Both episodic and chronic heavy drinking is associated with academic, social, and health problems. Potential academic problems include class absenteeism and substandard performance. Potential social problems include disrupted relationships, sexual victimization, arguments, and fights. Potential health problems include accidental injury and the consequences of unprotected sex. Additionally, because alcohol is toxic to the body, chronic heavy drinking causes a multitude of physical problems, especially in the brain and digestive system.

2. Alcohol is a central nervous system depressant that, in a low dosage (BAC under .06), produces positive feelings by reducing inhibition and anxiety while producing a mildly stimulating “buzz” and mildly impairing judgment.
3. The negative depressant effects of alcohol intensify as BAC rises above .06 and produce fatigue, impairment of coordination, and increased impairment of judgment while simultaneously erasing the positive, low-dosage effects. (Not surprisingly, intoxication is involved in a majority of violent student behaviors, including acquaintance rape, vandalism, and fights, as well as about half of vehicular accidents.)
4. If BAC rises above .15, the drinker can pass out and/or experience a memory loss (blackout) the next day. While passed out, a drinker can die from choking on his or her vomit. Breathing will slow as the central nervous system becomes increasingly anesthetized.
5. If BAC rises above .30, the drinker is at risk of alcohol poisoning from respiratory failure. An intoxicated person is at risk for death from alcohol poisoning if s/he
 - a) is passed out and cannot be awakened, or
 - b) has cold, clammy, bluish or unusually pale skin, or
 - c) breathes slowly (less than 8 times per minute) or irregularly (more than 10 seconds between breaths), or
 - d) vomits while asleep/passed out and does not awaken.

As a member of the University community, anyone who recognizes that a student is in danger of alcohol poisoning should call 911 to request the assistance of Emergency Medical Services (EMS). If the call is placed from campus, students should call the Department of Campus Safety emergency line (x7000). Officers can direct EMS to the proper location as quickly as possible.

6. About 5-10% of Americans develop alcohol dependence, a brain disease that can lead to death. Although some drinkers, especially those with a genetic predisposition, are at greater risk for alcohol dependence than others, no drinker is exempt from the potential to develop an alcohol use disorder. Therefore, the University encourages all students who drink to periodically seek an “alcohol check-up” and provides resources for doing so through Counseling Services.

C. University Services

1. Counseling Services (www.trinity.edu/counseling) offers a variety of services and resources to students, including:
 - a) Anonymous, online alcohol use assessment and feedback through its web site for those who desire an “alcohol check-up” or are concerned about their alcohol use;

- b) Confidential consultations with a counselor for those who desire an “alcohol check-up” or who are concerned about their own alcohol use or that of a friend or family member;
 - c) Confidential counseling concerning alcohol use;
 - d) Referrals to off-campus specialists and support groups for the treatment of alcohol dependence;
 - e) Educational materials;
 - f) Educational programs for classes and other student groups.
2. Residential Life staff address residents’ concerns and make appropriate referrals related to the negative effects of alcohol use, including interpersonal conflicts, vandalism, and health concerns.
 3. Health Services (www.trinity.edu/departments/health_services/index.htm) treats injuries and illnesses associated with alcohol use and refers students who may have problems related to alcohol use to Counseling Services or an off-campus specialist for assessment and treatment, if needed.
 4. The Dean of Students coordinates the Trinity Alcohol Coalition that periodically reviews University policy, sanctions, educational initiatives, and treatment efforts.

Alcohol Sanctions

Please be aware that the following guidelines have been endorsed by the Trinity University Alcohol Coalition (a group of students, faculty, and staff), the Student Court, and the Student Affairs Office, and will usually be imposed upon students who are found responsible for violating policies. (The Student Court and the Student Affairs staff have discretion to adjust sanctions in consideration of specific situations.)

- **First alcohol violation**
 - Participation in Alcohol.edu (with a \$25 fee)
 - Probation limited to alcohol offenses for the time remaining at Trinity University
 - Parental notification if alcohol infraction is coupled with other simultaneous violations of policy including, but not limited to, hosting, parties, disorderly conduct, or excessive noise
- **Second alcohol violation**
 - Alcohol use consultation
 - General probation for the time remaining at Trinity University (any violation while on general probation may result in suspension)
 - Parental notification
- **Third alcohol violation**
 - Suspension for at least one semester

2006 Biennial Review

- **Hosting**

General probation for the time remaining at Trinity University (any violation while on general probation may result in suspension)

Parental notification

APPENDIX III – 2004 AND 2005 EMAILS TO EMPLOYEES

December 10, 2004

TO: All University Employees

FROM: Craig McCoy
Vice President, Fiscal Affairs

SUBJECT: Drug and Alcohol Policy Statement

Trinity University is committed to providing a workplace environment which is free from illegal drug use and the abuse of alcohol.

The Drug-Free Workplace Act of 1988 (41 U.S.C.A. Section 701-707) and the Drug-Free Schools and Communities Act Amendment of 1989 (Public Law 101-226) (20 U.S.C. Section 1145g) require that all employees be notified that the unlawful manufacture, sale, distribution, possession or use of a controlled substance in or on any premises or property owned or controlled by the University is prohibited. A controlled substance is any substance so defined by federal or state statute or regulation.

Trinity's Drug and Alcohol policy is attached. This policy addresses objectives, standards of conduct, assistance, health risks and legal implications. I ask each of you to become familiar with this policy and to assist in keeping the University free from illegal drug use and the abuse of alcohol.

From: McCoy, Craig
Sent: Monday, September 19, 2005 2:37 PM
To: Trinity Faculty/Staff
Subject: Drug and Alcohol Policy

Attachments: Drug and Alcohol Abuse.doc

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APPENDIX IV – EMPLOYEE POLICY Drug and Alcohol Abuse

Trinity University recognizes its responsibility to provide a healthy environment within which faculty and staff may work in a drug and alcohol-free workplace. If an employee is found in violation of University or state alcohol and drug abuse policies, the circumstances accompanying each individual case are considered when determining the consequences. Educational interventions are emphasized; however, when indicated, counseling or other therapeutic activities may be required.

Based on its commitment to assure the safety and health of its employees, the University seeks to maintain work and learning environments free of the unlawful manufacture, distribution, possession or use of controlled substances or the abuse of alcohol. Drug and alcohol abuse affects the responsible conduct of business, teaching and learning; therefore, it will not be tolerated.

This policy is based on the following objectives:

1. To maintain a safe and healthy environment for all students and employees;
2. To maintain the good reputation of the University and its employees within the community;
3. To minimize accidental injuries to persons or property;
4. To keep absenteeism and tardiness at a minimum and to improve the effective performance of job duties and productivity of all employees;
5. In appropriate circumstances, to assist employees in securing alcohol or substance abuse rehabilitation;
6. To comply with the federal Drug-Free Workplace Act of 1988, the Drug-Free Schools and Communities Act Amendments of 1989 and other applicable legislation; and,
7. To adopt and implement a program to prevent the use of illicit drugs and abuse of alcohol by employees.

As used in this policy, the following definitions apply:

1. "Drugs or other controlled substances" means any substance, including alcohol, capable of altering an individual's mood, perception, pain level or judgment.

2. A "prescribed drug" is any substance prescribed for individual consumption by a licensed medical practitioner. It includes prescribed drugs and over-the-counter drugs which have been legally obtained and are being used for the purpose for which they were prescribed or manufactured.
3. An "illicit drug" or chemical substance is: (a) any drug or chemical substance, the use, sale or possession of which is illegal under any state or federal law, or (b) one which is legally obtainable but has not been legally obtained. The term includes prescribed drugs not legally obtained and prescribed drugs not being used for prescribed purposes.
4. The term "controlled substance" means a controlled substance in schedules I through V of section 202 of the Controlled Substance Act (21 U.S.C.S. 812) or whose possession, sale or delivery results in criminal sanctions under the Texas Controlled Substances Act (Art. 4476-13, TCS). In general, this includes all prescription drugs, as well as those substances for which there is no generally accepted medicinal use (e.g., heroin, LSD, marijuana, etc.) and substances which possess a chemical structure similar to that of a controlled substance (e.g., "Designer Drugs"). The term does not include alcohol.
5. "Alcohol" means "alcohol, or any beverage containing more than one-half percent of alcohol by volume, which is capable of use of beverage purposes, either alone or when diluted."
6. "Alcohol abuse" means the excessive use of alcohol in a manner that interferes, but not chronically, with (1) physical or psychological functioning; (2) social adaptation; or (3) occupational functioning.
7. The term "conviction" means a finding of guilt (including a plea of nolo contendere) and/or imposition of sentence by any judicial body charged with the responsibility to determine violations of the federal or state criminal drug statutes.
8. "Cause for reasonable suspicion" shall be established by: (1) observation; (2) actions/behaviors of the individual; (3) witness by supervisor or other reliable individual of possession or use; or (4) any other legal measure used for alcohol or drug detection.
9. The term "criminal drug statute" means a criminal statute involving manufacture, distribution, dispensation, use or possession of any controlled substance.
10. "Sanctions" may include completion of an appropriate rehabilitation or assistance program, termination from employment, other disciplinary action, or referral to authorities for prosecution. If an employee has been convicted of a criminal drug statute, sanctions must be imposed within thirty (30) days.

11. “Workplace” means any office, building, classroom or property (including parking lots) owned or operated by the University or any other site at which the employee is to perform work.

12. An “employee” of Trinity University is any faculty, staff or student receiving remuneration for services rendered.

13. “Possess” means to be contained either on an employee’s person or in an employee’s vehicle, tools or areas entrusted to the employee.

14. “Impaired” means under the influence of an illegal drug or alcohol such that the employee is unable to perform his/her assigned tasks properly.

Standards of Conduct:

1. The unlawful manufacture, distribution, possession or use of illicit drugs or alcohol is strictly prohibited.

2. Sanctions will be imposed on employees (consistent with local, state, and federal law), up to and including termination of employment and referral for prosecution, for violation of the standards of conduct set forth above.

3. The University shall conduct a biennial review of its drug and alcohol abuse prevention program. It shall determine and put in report format: (1) the effectiveness of the program, and (2) the consistency of the enforcement of sanctions imposed pursuant to the program. It shall also evaluate whether any changes are needed and shall implement any such changes.

4. The University shall have available for review by the Secretary of Education, or designee, other applicable governmental agencies and the general public, if requested, copies of all documents distributed to employees under the drug and alcohol abuse prevention program and copies of the biennial review, also.

5. The University will establish or participate in an alcohol and drug-free awareness program to inform employees about: (1) the dangers of alcohol and drug abuse; (2) the University policy of maintaining a workplace and learning environment free from drug and alcohol abuse; (3) any available alcohol and drug counseling, rehabilitation, and employee assistance programs; and (4) the penalties that may be imposed upon employees for alcohol and drug abuse violations.

If a supervisor reasonably suspects that usage of a controlled substance or of alcohol has affected an employee’s job performance, the supervisor shall immediately notify the appropriate department head or other designated administrative official, and upon direction, the supervisor or other designated administrative official shall discuss with the employee the suspected alcohol or drug-related problems. The employee should be advised of any available alcohol and drug counseling, rehabilitation or employee

assistance programs, and the terms of any applicable disciplinary sanctions. All such meetings between the employee and the supervisor or other designated administrative official to address the suspected alcohol or drug-related problem and/or its resolution shall be documented in a memorandum to the record. Should such discussion and/or participation in any available alcohol or drug counseling, rehabilitation or employee assistance program fail to resolve the suspected alcohol or drug-related problems, or should the employee fail to meet the terms of any applicable disciplinary sanctions, the employee may be subject to disciplinary action up to and including termination.

Assistance for Employees. The Department of Counseling and Career Services will provide referrals to substance abuse treatment clinics, drug abuse counselors and private community organizations involved in rehabilitation programs for alcohol and drug impairment. Literature and other relevant information on alcohol and drug abuse may be obtained at University Health Services.

Other Regulations:

1. A copy of the University's drug and alcohol abuse policy shall be provided to each employee on or before their first day of employment, along with a signed acknowledgement of receipt of the policy. The signed receipt will be kept in the employee's file.
2. Any employee whose off-duty use of alcohol, drugs or other controlled substances results in absenteeism, tardiness, impairment of work performance, or is the cause of workplace accidents, will be reported to the immediate supervisor and the Office of University Personnel Services. Referrals to drug abuse counselors will be provided by the Office of Counseling and Career Services.
3. Any disciplinary action shall be governed by University policies on discipline and dismissal. A record of the action will be placed in the employee's personnel file.
4. As a condition of employment, employees on government grants or contracts must abide by the required notification statement and must report any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after such conviction. The employer, in turn, must so notify the contracting federal agency within ten (10) days after receiving notice from an employee or otherwise receiving actual notice of such conviction, and within thirty (30) days must impose sanctions on the employee involved. Such sanctions may take the form of personnel actions against such an employee, up to and including termination or requiring the employee to satisfactorily participate in an approved drug abuse assistance or rehabilitation program.

Health Risks of Alcohol, Drugs and Chemicals:

1. **Alcohol.** Health hazards associated with the excessive use of alcohol or with alcohol dependency include dramatic behavioral changes, retardation of motor skills and impairment of reasoning and rational thinking. These factors result in a higher incidence of injury and accidental death for such persons than for non-users of alcohol. Nutrition also suffers and vitamin and mineral deficiencies are frequent. Prolonged alcohol abuse causes bleeding from the intestinal tract, damage to nerves and the brain, psychotic behavior, loss of memory and coordination, damage to the liver (often resulting in cirrhosis), impotence, severe inflammation of the pancreas, and damage to the bone marrow, heart, testes, ovaries and muscles. Cancer is the second leading cause of death in alcoholics and is ten (10) times more frequent than in non-alcoholics. Sudden abstinence from alcohol by persons dependent on it may cause serious physical withdrawal symptoms.

2. **Drugs and Chemicals.** The use of illicit drugs and chemicals may cause the same general type of physiological and mental changes seen with alcohol, though frequently those changes are more severe and more sudden. Death or coma resulting from overdose of drugs and chemicals is more frequent than from alcohol, but unlike alcohol, abstinence can lead to reversal of most physical problems associated with drug use. There are also health risks resulting from intravenous drug use. In addition to the adverse effects associated with the use of a specific drug, intravenous drug users who use unsterilized needles or who share needles with other drug users can develop AIDS, hepatitis, tetanus (lock jaw), and infections in the heart. Permanent brain damage may also result. Chemicals, which include solvent inhalants and aromatic hydrocarbons, such as glue, lacquers and plastic cement, also present health risks. Fumes from these substances cause symptoms similar to alcohol. Hallucinations and permanent brain damage may occur.

The information below provides excerpts which are taken from the *Federal Register*, summarizing illicit drugs and their effects.

Controlled Substances Health Risks.						
Drugs Syndrome	Trade or Other Names	Dependence	Physical	Psychological	Effects of	Withdrawal Overdose
Opium	Dover's Powder, Paregoric, Parepectolin	High	High	Possible Euphoria, drowsiness, respiratory depression, constricted pupils, nausea	Slow, shallow breathing, clammy skin, convulsions, coma, possible death	Watery eyes, runny nose, yawning, loss of appetite, irritability, tremors, panic, cramps, nausea, chills and sweating
Morphine	Morphine, MS-Contin, Roxanol, Roxanol-SR	High	High			
Codeine	Tylenol w/Codine, Empirin w/Codentine, Robitussan A-C, Fiorinal w/Codeine	Moderate	Moderate			
Heroin	Diacetylmorphine, Horse, Smack					
	Dilaudid	High	High			
Hydromor-Phine	Demerol, Mepergan	High	High			
Meperidine (Pethidine)	Dolophine, Methadone, Methadose	High	High			
Methadone	Numorphan, Percodan, Percocet, Tylox, Tussionex, Fentanyl, Darvon, Lomofil, Talwin*	High	High-low			
Other Narcotics	*not designated a drug by the CSA.	High-low	High-low			

DEPRESSANTS						
Choral Hydrate	Notec	Moderate	Moderate	Slurred speech, disorientation, drunken behavior without the odor of alcohol	Shallow respiration, clammy skin, dilated pupils, weak and rapid pulse, coma, possible death	Anxiety, insomnia, tremors, delirium, convulsions, possible death
Barbiturates	Amytal, Butisol, Fiorinal, Lotusate, Nembutal, Seconal, Tuinal, Phenobarbital	High-Moderate	High-Moderate			
Benzodiazepines	Ativan, Dalmane, Diazepam, Librium, Xanax, Serax, Valium, Tranxexa, Verstran, Versed, Halcion, Paxipam, Restoril	Low	Low			
Methaqualone	Quaalude	High	High			
Glutethimide	Doriden	High	Moderate			
Other Depressants	Equanil, Miltown, Noludar, Placidyl, Valmid	Moderate	Moderate			
STIMULANTS						
Cocaine **	Coke, Flake, Snow, Crack	Possible	High	Increased alertness, excitation, euphoria, increased pulse rate and blood pressure, insomnia, loss of appetite	Agitation, increase in body temperature, hallucinations, convulsions, possible death	Apathy, long periods of sleep, irritability, depression, disorientation
Amphetamines	Biphetamine, Delcobese, Desoxyn, Dexedrine, Obetrol	Possible	High			

** Designated a narcotic under the CSA

STIMULANTS (Continued)							
Phenmetrazine	Preludin	Possible	High				
Methyphenidate	Ritalin	Possible	Moderate				
Other Stimulants	Adipex, Cylert, Diderex, Ionamin, Melfiat, Plegine, Sanorex, Tenuate, Tepanil, Prelu-2	Possible	High				
HALLUCINOGENS							
LSD	Acid, Microdot	None	Unknown	Illusions and hallucinations, poor perception of time and distance	Longer, more intense "trip" episodes, psychosis, possible death	With-drawal syndrome not reported	
Mescaline and Peyote	Mexc, Buttons, Cactus	None	Unknown				
Amphetamine Variants	2,5-DMA, PMA, STP, MDA, MDMA, TMA, DOM, DOB	Unknown	Unknown				
Phencyclidine	PCP, Angel Dust, Hog	Unknown	High				
Phencyclidine Analogues	PCE, PCPy, TCP	Unknown	High				
Other Hallucinogens	Bufofenine, Ibogaine, DMT, DET, Psilocybin, Psilocyn	None	Unknown				

CANNABIS						
Marijuana	Pot, Acapulco Gold, Grass, Reefer, Sinsemilla, Thai Sticks	Unknown	Moderate	Euphoria, relaxed inhibitions, increased appetite, disoriented behavior	Fatigue, paranoia, possible psychosis	Insomnia, hyper-activity, and decreased appetite occasionally reported
Tetrahydrocanna-binol	THC, Marinol	Unknown	Moderate			
Hashish	Hash	Unknown	Moderate			
Hashish Oil	Hash Oil	Unknown	Moderate			

Legal Implications of Alcohol and Drug Use. This section summarizes laws concerning alcohol and drug use.

Texas Law

Offense	Minimum Punishment	Maximum Punishment
Manufacture of delivery of controlled substances (drugs)	Confinement in a state jail for a term of not more than 2 years, or less than 180 days, and not to exceed fine of \$10,000.	Confinement in TDC for life or for a term of not more than 99 years or less than 15 years, and a fine not to exceed \$250,000.
Possession of controlled substances (drugs)	Confinement in jail for a term of not more than 1 year, and a fine not to exceed \$4,000.	Confinement in TDC for life or for a term of not more than 99 years or less than 15 years, and a fine not to exceed \$250,000.
Delivery of Marijuana	Confinement in jail for a term not to exceed 180 days, and a fine not to exceed \$2,000.	Confinement in TDC jail for life or for a term of not more than 99 years or less than 10 years, and a fine not to exceed \$100,000.
Possession of Marijuana	Confinement in jail for a term of not more than 180 days, and a fine not to exceed \$2,000.	Confinement in TDC for life or for a term of not more than 99 years or less than 10 years, and a fine not to exceed \$50,000.
Driving While Intoxicated (Includes intoxication from alcohol, drugs, or both)	Confinement in jail for a term of not less than 72 hours.	Confinement in TDC for a term of not more than 180 days, and a fine not to exceed \$2,000.
Public Intoxication		A fine not to exceed \$500.
Purchase of alcohol by a minor; Consumption of alcohol by a minor; Possession of alcohol by a minor	A fine not to exceed \$500, plus community service, and suspension of Texas Driver's License.	Confinement in jail for a term of not more than 180 days, and/or a fine not less than \$250 and not more than \$2,000, plus community service, and suspension of Texas Driver's License.
Sale of Alcohol to a Minor		Confinement in jail for a term of not more than 180 days and a fine not to exceed \$2,000.

Federal Law

Offense	Minimum Punishment	Maximum Punishment
Manufacture, distribution, or dispensing of drugs (includes marijuana)	A term of imprisonment not more than one year, and a minimum fine of \$1000.	A term life imprisonment without release and no eligibility for parole, and a fine not to exceed \$8,000,000 (for an individual) or \$20,000,000 (if other than an individual).
Possession of drugs (including marijuana)	Civil penalty in amount not to exceed \$10,000.	Imprisonment for not more than 20 years or not less than 5 years, a fine of not less than \$5,000 plus costs of investigation and prosecution.
Operation of a common carrier under the influence of alcohol or drugs.		Imprisonment for up to 15 years, and a fine not to exceed \$250,000.

Program Review: Trinity University will conduct a biennial review of the program to determine the effectiveness and implement changes to the program, if they are required, and ensure that sanctions for violations are consistently enforced.

APPENDIX V – REPORT ON THE 2005 HEALTH BEHAVIORS SURVEY

Academically-related Results from the 2005 Health Behaviors Survey

Richard Reams & Diane Saphire
September 20, 2006

Introduction

Between January 31 and February 11 of 2005, professors administered the 2005 Health Behaviors Survey in 29 randomly selected classes. This report contains findings from the 60-item survey that are likely to be of interest to faculty because of the findings' association with academic performance.

Our sample of TU undergraduates (308 women, 190 men) is representative of the undergraduate population: the class representation was 22%-27% for each class for each sex. Additionally, our in-class method of collecting completed surveys resulted in a high response rate. Although we did not compute the response rate this year (it is a rather labor-intensive process), we have obtained response rates of 85% or higher on two previous surveys of Trinity students' health behaviors. The response rate was higher for women than for men, as is typical of most surveys. Because we report results separately by sex, however, this gender imbalance does not skew the results.

For many of the results reported below, we include comparison data from the National College Health Assessment conducted by the American College Health Association (ACHA) during spring of 2003. ACHA's national survey of students at 71 colleges and universities included 33,116 women and 20,995 men. As you compare the results from the Trinity and ACHA surveys, note that each difference between percentages may be exacerbated or attenuated by one or more of the following factors:

- The time frame for survey items was "fall semester 2004" for the Trinity survey and "within the last school year" for the ACHA survey; thus, the differences between the samples (with Trinity percentages often being larger than the national percentages) may be attenuated because the time frame for the survey respondents at Trinity is likely to be briefer than the time frame for the respondents to the national survey.
- Academics at Trinity are probably more rigorous than academics at many of the colleges in the ACHA sample; thus, Trinity is likely to be a more stressful setting than is found at many other universities, with the attendant physical and psychological maladies that stress evokes or exacerbates.
- About 18% of the ACHA sample was older than 24 whereas few Trinity undergraduates are older than 24, a difference that is particularly relevant with regard to alcohol consumption, which is higher on average among younger students (Wechsler et al, 1993).
- About 40% of the ACHA sample lives in residence halls whereas about 80% of Trinity students live in residence halls; thus, physical and psychological contagion are likely to be more prevalent among Trinity students, and drinking behaviors are exacerbated when students live with each other (Wechsler et al., 1993).

Results

A Comparison of Trinity Undergraduates with ACHA's National Sample

We were able to compare data from the Trinity and ACHA surveys on 14 items with the following common root question: **Which of the following negatively affected your academic performance (e.g., you received an incomplete, dropped a course, received a lower grade in a class or on an assignment) during fall semester 2004 (TU) [or within the last school year (ACHA)]?** Results are listed in descending order according to prevalence among TU undergraduates, based on averaged percentages for men women and men. P-values of less than .05 are cited to indicate probable sex differences among TU students as well as probable differences between Trinity students and ACHA students separately for men and women (n.s.=non-significant).

				TU M vs. F	TU vs. ACHA
Stress				p<.001	
	TU women	68%			
	ACHA	36%			p<.001
	TU men	44%			
	ACHA	26%			p<.001
Sleep difficulties				p=.03	
	TU women	44%			
	ACHA	25%			p<.001
	TU men	34%			
	ACHA	24%			p<.002
Cold, flu, sore throat				p=.009	
	TU women	44%			
	ACHA	27%			p<.001
	TU men	32%			
	ACHA	21%			p<.001
Internet use or computer games				n.s.	
	TU women	25%			
	ACHA	10%			p<.001
	TU men	27%			
	ACHA	18%			p<.002

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			TU M vs. F n.s.	TU vs. ACHA
Relationship difficulty				
TU women	25%			
ACHA	17%			p<.001
TU men	25%			
ACHA	15%			p<.001
Concern for a troubled friend or family member				
TU women	27%		p=.001	
ACHA	21%			p<.02
TU men	15%			
ACHA	16%			n.s.
Allergies				
TU women	19%		n.s.	
ACHA	4%			p<.001
TU men	18%			
ACHA	4%			p<.001
Depression or Anxiety Disorder				
TU women	20%		n.s.	
ACHA	16%			n.s.
TU men	15%			
ACHA	11%			n.s.
Alcohol use				
TU women	14%		n.s.	
ACHA	6%			p<.001
TU men	15%			
ACHA	11%			n.s.
Sinus or ear infection, bronchitis, or strep throat				
TU women	16%		n.s.	
ACHA	10%			p<.001
TU men	12%			
ACHA	6%			p<.001

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			TU M vs. F	TU vs. ACHA
Death of a friend or family member			n.s.	
TU women	8%			
ACHA	10%			n.s.
TU men	6%			
ACHA	8%			n.s.
Chronic illness (e.g., diabetes, asthma, etc.)			n.s.	
TU women	8%			
ACHA	2%			p<.001
TU men	4%			
ACHA	1%			p<.001
Injury			n.s.	
TU women	3%			
ACHA	3%			n.s.
TU men	5%			
ACHA	4%			n.s.
Eating Disorder or problem			p=.003	
TU women	6%			
ACHA	2%			p<.001
TU men	1%			
ACHA	0%			*

*Due to rounding in the ACHA report, we cannot determine whether this difference is statistically significant.

Trinity Students' Use of Alcohol and Other Drugs

The following two results sections do not have comparable data from the ACHA survey. When available, comparison data from previous Trinity surveys are provided. These data indicate that percentages have held fairly steady for the past several years for most items. P-values of less than .05 are cited to indicate probable sex differences among TU students (n.s.=non-significant).

During the last semester [fall 2004], did you experience the following at least once as a result of your drinking?

		TU Comparison Data		
		F 01	F 00	F 99
Attended class with a hangover? (p=.03)				
Women	30%		31%	27%*
Men	41%		44%	39%*
Got behind in academic work? (n.s.)				
Women	20%		23%	23%
Men	24%		26%	25%
Attended class while under the influence? (p=.006)				
Women	9%		7%	--
Men	17%		18%	--

*Prior to the 2002 survey, which inquired about fall semester 2001, the item combined “attended class with a hangover or while under the influence.” These two behaviors were assessed separately in 2002 and 2005. Given that other percentages have held steady during the past 5 years, it is reasonable to conclude that the students who attended at least one class under the influence is a subset of the students who also attended at least one class with a hangover.

During last semester [fall 2004], how many times did you miss a class as a consequence of drinking the night before? (n.s.)

		TU Comparison Data		
		F 01	F 00	F 99
None				
Women	72%		71%	77%
Men	62%		60%	67%
1-5 times				
Women	24%		28%	--*
Men	32%		34%	--
6 or more times				
Women	3%		<1%	--
Men	5%		7%	--

*Prior to the 2002 survey, which inquired about fall semester 2001, the item offered only yes/no responses; beginning with the 2002 survey, respondents had multiple response options, as shown.

During last semester [fall 2004], how often did you use marijuana? (p=.0005)

		TU Comparison Data	
		F 01	F 00
Never			
Women	75%		70%
Men	59%		64%

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Less than once a month

Woman	14%		15%	19%
Men	15%		21%	17%

Once or several times a month

Women	6%		10%	7%
Men	10%		11%	7%

Once or several times a week

Women	3%		2%	3%
Men	9%		6%	9%

Daily

Women	2%		1%	1%
Men	6%		6%	4%

Trinity Students' Mental Health

Mental health issues can exert a negative influence on academic performance or give evidence to the psychological vulnerability of a portion of the student body. Indeed, some mental illnesses (e.g., depression, bipolar disorder, schizophrenia) typically emerge for the first time in late adolescence.

TU Comparison Data
F 01

Have you ever attempted suicide? (n.s.)

Women	7%		7%
Men	7%		6%

During last semester [fall of 2004] did you seriously consider committing suicide? (n.s.)

Women	2%		3%
Men	5%		3%

Has a physician or mental health professional ever diagnosed you as suffering from depression? (n.s.)

Women	17%		11%
Men	13%		11%

Have you taken medication (e.g. Prozac, Xanax) prescribed to you for a psychological condition? (n.s.)

Currently taking such medication

Women	8%		5%
Men	4%		6%

Have taken such medication in the past, but not currently

Women	18%		10%
Men	23%		14%

Discussion

The results reported above offer a glimpse into the personal lives of Trinity undergraduates with a focus on those experiences with direct and indirect implications for academic performance. These results serve as a reminder of the vicissitudes that are common among 18-22 year olds who are navigating the transition from adolescence to adulthood. Additionally, Trinity's distinctive residential environment provides not only a stimulating environment for student learning and development, but also evokes difficulties in the medical, interpersonal, emotional, and behavioral realms.

Are contemporary college students functioning more poorly than college students of generations past? Generally speaking, the answer is yes, and a major culprit appears to be greater anxiety, which itself is a consequence of multiple social forces. In her review of published research, Twenge (2000) found that trait anxiety (i.e. persistent rather than situational anxiety) reported by college students between 1952 and 1993 increased "considerably"—a standard deviation, on average, across multiple measures—beginning in the 1950s and continuing through the 1960s and 70s, with men's and women's trait anxiety increasing at about the same rate. Amid multiple contributing factors, Twenge (2000) noted that "greater opportunities lead to greater expectations and more stress" (p.1018). And, in comparison to the national sample of college students, a larger proportion of Trinity students report that stress "negatively affects academic performance." In addition to the stressors that most college students encounter (see Newton, 1998), the greater prevalence of stress among Trinity students is understandable given that our students are exceptionally bright, great achievement is expected of them, and they are obtaining an expensive education which, for many, means accumulating large financial debt.

In addition to the direct contribution of stress to academic underperformance, stress also contributes indirectly through depression (as well as other psychological conditions), sleep disturbance, and illness. Stress, both chronic and acute, is a major contributing factor to depression (Hammen, 2005), and about 15% of Trinity undergraduates reported having been diagnosed with depression at some time in their life, an increase from 11% in 2001; other students have likely experienced periods of depression that have taken a toll on academic performance without seeking diagnosis or treatment. (Trinity vs. ACHA comparisons regarding the percentages of male and female respondents who reported that "depression or anxiety disorder" negatively affected academic performance showed a trend toward statistical significance with $p=.08$ for men and $p=.06$ for women.) Stress also contributes to sleep difficulties and makes students more vulnerable to illness (e.g., cold, flu, sore throat), the second and third most frequently reported factors related to academic difficulty. Residential living, where noise and germs are easily shared, contributes to both sources of academic difficulties.

One fourth of male and female Trinity undergrads cited relationship difficulties as a cause of academic difficulty, percentages higher than those from the national sample. In part, this difference may reflect that Trinity students are younger on average than those of the national sample; consequently, they have less experience regulating their emotions and negotiating the

ups and downs of interpersonal relationships. It is also possible that residential living provides more opportunities for interpersonal loss and conflict than does living at home or off-campus.

Allergies contribute to academic difficulty among Trinity students far more commonly than among college students in general. Nearly 20% of Trinity undergraduates reported that allergies had a negative impact on academics (i.e., they received an incomplete, dropped a course, or received a lower grade in a class or on an assignment) as compared to 4% of college students nationally. Such is a consequence of living in San Antonio. It is possible that many of these students are encountering allergies for the first time as a result of moving to San Antonio.

The dimensions of health discussed above are largely imposed upon undergraduates and test students' abilities to cope with various vicissitudes of life. In contrast, several dimensions of health are within most students' control—use of alcohol, use of other drugs, and use of computer for recreational purposes. (Some students have little or no control due to an addictive or compulsive disorder.) The excessive use of alcohol is clearly a significant contributor to academic underperformance as well as a major health and safety threat and a significant contributor to problems in the residence halls.¹ Alcohol use is higher among Trinity students than among college students in general because our undergraduate demographics are consistent with demographic factors that Wechsler et al. (1993) identified as being associated with heavy drinking. That is, our student body is predominantly white, under age 25, not very religious (generally speaking), and living with each other. Additionally, Wechsler et al. (2000) reported that higher rates of binge drinking occur at universities like Trinity where admission is competitive as compared to universities where admission is not competitive. The competitive, high achievement orientation of our students may extend to drinking as well as academics. It is also likely that intoxication serves to relieve stress (Lawyer et al., 2002) and anxiety (Perkins, 1999), albeit a coping strategy that may provide immediate, temporary respite only to be followed by one or more negative consequences, academic and/or otherwise. It is also interesting and distressing to note that, unlike women in the national sample, women at Trinity have achieved gender parity with men; about 22% of both sexes reported getting behind in academic work, and about 15% of both sexes admitted that alcohol use negatively affected their academic performance such that they received an incomplete, dropped a course, or received a lower grade in a class or on an assignment.

Marijuana is the most commonly used illicit drug among Trinity students, with 15% of men and 5% of women reporting using marijuana at least once per week (6% of men and 2% of women reported daily use). In his review of the scientific literature, Earleywine (2002) concluded that “marijuana intoxication clearly impairs aspects of memory, perception, reading [and] arithmetic” (p. 76); thus, the use of marijuana may hinder the learning of some users, especially those who use regularly.

Also of significance is the finding that about 25% of male and female undergraduates received an incomplete, dropped a course, or received a lower grade in a class or on an assignment because of their excessive use of the computer for non-academic purposes (e.g., gaming, IMing, Facebook, MySpace). Like the intemperate use of alcohol, the excessive and undisciplined

recreational use of the computer is a significant factor than interferes with academics (Kubey, Lavin & Barrows, 2001), and one in which most students have the ability to exercise self-discipline. Our wired campus and the ubiquity of personal computers among our students, in addition to their younger average age, may help account for the higher percentages of Trinity students who cited recreational computer use as having a negative impact on academics as compared to students in the national study. Additionally, as with alcohol use, Trinity women have achieved gender parity with Trinity men, unlike their female peers in the ACHA national survey.

These findings have some practical applications. First, many of the findings serve to increase the empathy of, or remind faculty of, the challenges that undergraduates encounter as residential students under age 23 at a competitive, academically-demanding university. Many students face the stressful expectation that their Trinity education should lead to a prestigious and high-paying job (after graduate school, of course!), while encountering constant and multiple opportunities to engage in lower-stress recreational activities. Second, faculty may want to ask chronically underperforming students about the academic impact of their use of alcohol and other drugs, recreational computer use, and other distractions.

Note

¹Consequently, Student Affairs devotes considerable attention addressing alcohol issues through policy enforcement, alcohol education (including a recently instituted mandatory online alcohol education course for incoming first years), and intervention. This ongoing effort is guided by the Dean of Students and Director of Residential Life as well as the Alcohol Coalition, which is composed of faculty, staff and students. To learn more, visit the Student Affairs alcohol web page at http://www.trinity.edu/departments/student_affairs/alcohol/index.htm.

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APPENDIX VI – LONGITUDINAL SURVEY DATA

Dr. Richard Reams (Counseling Services) and Dr. Diane Saphire (Institutional Research) periodically conduct an anonymous Health Behaviors Survey with Trinity undergraduates. The survey, which is administered by professors in approximately 30 randomly-selected classes during two weeks of February of each survey year, includes items about the use of alcohol and other drugs.

*indicates data not collected that year (to keep the survey to a reasonable length, some items are rotated in and out)

AOD prevalence of use

(use at least once during preceding fall semester)

	2000 n=499	2001 n=531	2002 n=518	2005 n=498
Alcohol	87%	79%	81%	80%
Tobacco (smoking)	42	33	34	28
Daily	13	11	11	7
Occasionally	29	22	23	21
Tobacco (smokeless)	13	10	11	*
Marijuana	31	33	37	31
Daily	4	2	4	3
1+ times a week	4	6	5	5
1+ times a month	6	7	11	8
< Once a month	16	18	18	14
Other Drugs				
Hallucinogens	10.0	6.4	8.4	7.8
Stimulants (not cocaine)	7.6	7.8	8.7	4.4
Sedatives (not GHB, Rohypnol)	7.4	6.7	6.4	2.4
MDMA (ecstasy)	7.2	6.4	6.1	2.0
Cocaine	6.0	2.8	3.3	4.6
Inhalants	5.4	2.1	2.4	1.0
GHB and Rohypnol	2.6	2.7	0.8	*
Opiates	2.6	2.6	1.5	1.2
Ketamine	1.4	0.9	*	*
Steroids	1.0	0.6	*	1.0
Recreational use of prescription medications	*	9.8		
Anti-anxiety				5.2
Anti-depressant				1.6
ADD				12.3
“Pain-killer”				6.8

Patterns of Drinking
(during fall semester, unless indicated otherwise)

Number of times he student consumed				
5 or more drinks during an evening				
during the two weeks before survey				
None	49%	37%	40%	52%
1-2	28	29	22	25
3-4	13	20	16	14
5-6	6	8	12	6
7 or more	3	5	10	4
	2000	2001	2002	2005
Frequency the student drank				
with the goal of getting drunk				
during fall semester				
Never	27%	*	*	35%
Less than once per month	24	*	*	19
Once or several times per month	26	*	*	23
Once a week	12	*	*	14
More than once a week	12	*	*	11
Negative consequences of drinking				
during fall semester				
Attend class w/ hangover				
or under the influence	30%	32%		
w/ hangover			37	34
under the influence			12	12
Missed class	27	29	34	31
Forgot where I was or what I did	30	29	32	31
Got behind in academic work	22	21	24	22
Had unsafe sex	11	8	11	10
Was taken advantage of sexually	7	6	6	5
Number of times student got drunk				
during the 2 weeks before survey				
None	41%	37%	*	*
1-2	35	32	*	*
3-4	16	20	*	*
5-6	6	8	*	*
7 or more	3	3	*	*